

JPRS-TEP-87-017
24 JULY 1987



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JPRS Report

Epidemiology

24 JULY 1987

EPIDEMIOLOGY

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CARIBBEAN MEDICAL TECHNICIANS SEEK MORE RESEARCH FUNDS

Bridgetown BARBADOS ADVOCATE in English 23 May 87 p 1

[Text]

The Caribbean Association of Medical Technologists (CAMT) would like funding allocated to its members for research purposes.

Vice-president of the Association, Mr. Alvin Cummins said that it was not usual for funds to be allocated to medical technologists to do research; he would also like the medical technologists recognised as professionals.

Mr. Cummins said that there must be the support from Government, since even when approaching a lending agency the recommendation must be made by Government.

He said that there were a number of areas in which members would like to pursue research but they were restricted because of lack of funds.

Press conference

Mr. Cummins' comments came at a press conference yesterday which was called to announce plans for the Association's education conference and regional general meeting from November 17 to 30.

Chairman of the Barbados branch of CAMT, Mr. Arthur Pounder, said that the education conference will be a follow-up to one held in Antigua in 1977, where the standards and manpower needs of the Less Developed Countries were examined.

He said that at this session they would

be reviewing the manpower resources and looking at how the operational costs could be reduced in individual countries.

The conference will be attended by representatives from each Health Ministry in the CARICOM region; each of the three University of the West Indies campuses and from tertiary colleges in the countries, as well as persons from medical schools in the United Kingdom, Canada, and the United States.

Hope for journal

Mr. Pounder said that it is hoped that there will be a journal published to coincide with the conference and medical science technologists have been invited to submit papers on medical subjects.

The Caribbean Association of Medical Technologists will be celebrating its 21st anniversary in November. Mr. Pounder said that the original concept was for the Association to be an examining body but with the advent of the Barbados Community College and other tertiary institutions the Association now played the role as watchdog for medical technologists.

He said that in addition to this the Association was now concentrating on continuing education and acting as a trade union.

/9274

CSO: 5440/111

BRIEFS

HEALTH DATA BANK CREATED--Montevideo, 15 Jun (TELAM)--The Argentine Ministry of Public Health and Social Action and the Uruguayan Ministry of Public Health have signed an agreement to create a health data bank to gather relevant information on AIDS and other common diseases. On this occasion the Argentine deputy health minister said that Argentina has registered 78 cases of AIDS, including 30 fatal cases, while Uruguay has registered 11 cases of AIDS, including 7 fatal cases. [Summary] [Buenos Aires TELAM in Spanish 0419 GMT 16 Jun 87 PY] /8309

CSO: 5400/2065

CHOLERA 'EPIDEMIC' REPORTEDLY KILLING HUNDREDS

'Unprecedented Proportions'

MB231000 Johannesburg SAPA in English 0959 GMT 23 Jun 87

[Text] Johannesburg June 23 SAPA — Reports reaching Lisbon indicate that a cholera epidemic of unprecedented proportions is causing the death of hundreds of people in northern Angola and in the capital, Luanda, the SABC's Africa desk reports.

Portuguese officials have confirmed an emergency request for assistance has been made by the Angolan Government. Portugal has responded by sending medicines, vaccine and syringes to help counteract the cholera outbreak.

The reports said the water supply to Luanda is believed to be contaminated and thousands of people have cholera. Hundreds are feared to have died because of a lack of treatment. Angolan state radio has warned people to be careful of tap water.

Travellers from Luanda say the hospitals have many dying cholera patients and that the authorities are not in control of the situation. In Portugal, travellers to Angola have been urged to take precautions against the disease.

According to the Lisbon reports, the Angolan Government has only reported the deaths of 60 cholera sufferers to the World Health Organisation. The disease is said to have originated in the Soyo region near the border with Zaire about three months ago and it has now spread as far as Luanda, the SABC report said.

USSR Supplies Vaccines

MB211026 Luanda Domestic Service in Portuguese 0700 GMT 21 Jun 87

[Text] The USSR has granted 2.5 tons of cholera vaccine to the Angolan Government to help the fight the cholera epidemic in some parts of our country. According to a source at the USSR Embassy in Angola, the USSR is expected to send an additional 1.1 million cholera vaccine doses to Luanda.

According to the same source, the People's Republic of Angola will also receive a consignment of polio vaccine. The first shipment is expected to arrive in Luanda in October.

ANGOLA

HUMAN

BRIEFS

CHOLERA OUTBREAK REPORTED 'GRAVE'--Johannesburg June 24 SAPA--Stocks of cholera vaccine in Western Europe are temporarily exhausted as a result of the epidemic in Angola, SABC radio news reports. After trying to keep the outbreak secret, the Angolan Government has appealed to Portugal, Spain and the World Health Organisation for emergency assistance. Portugal has responded by sending all available cholera vaccine, 250,000 units, to Angola. A report from Lisbon said the outbreak is affecting the local population in particular as expatriate communities have been vaccinated by their employers. The epidemic has spread from Luanda to other cities and thousands of cases have been reported as far South as Benguela. A diplomat in Luanda has described the situation as very grave. [Text] [Johannesburg SAPA in English 0805 GMT 24 Jun 87] /8309

CSO: 5400/197

CARIBBEAN MEETING FINDS BARBADOS AHEAD IN FIGHTING AIDS

Bridgetown BARBADOS ADVOCATE in English 22 May 87 p 1

[text]

This country is said to be "well ahead" in its efforts to control the spread of the dreaded disease, AIDS.

This has been pointed out in a report on the Commonwealth Caribbean Medical Research Council which recently took place in Tortola, British Virgin Islands.

Professor E.R. "Mickey" Walrond of Barbados is the scientific secretary of the CCMRC noted that a paper was presented at the meeting which gave an update on AIDS in Barbados.

The report stated: "Barbados is evidently well ahead in its efforts to control the spread of the disease, and the conference provided a good focal point for the exchange of ideas on how this might be done."

Barbados has recorded 26 AIDS deaths while 39 cases have been identified since the disease first surfaced in 1984.

The Council also heard about the continued and significant work being done in the Leptospirosis research unit here.

The Leptospirosis unit is funded by the Medical Research Council (MRC) of the United Kingdom and in addition to research it does a good deal of

diagnostic work for cases of leptospirosis in Barbados.

One of the things the research has shown so far was that although monkeys in Barbados carry leptospirosis they did not appear to be transmitting it to humans, since the strains of the disease they carry were very different from those found in patients.

Fewer deaths

It was pointed out that as a result of the research being carried out in leptospirosis, there has been a drop in mortality of this disease from 15 per cent to five per cent in Barbados.

The report from the conference said: "One hopes that when the MRC funding is finished as it soon will, that at least the service work will be taken over for the benefit of the people in Barbados."

Two other papers showed aspects of efforts of regional co-operation of which Barbados was the focus; one was in the treatment of diving injuries; and the other related to studies done in Carriacou by the trainees in Family Medicine from the University of the West Indies unit in Barbados.

/9274

CSO: 5440/112

MINISTRY OUTLINES CAMPAIGN AGAINST AEDES ALBOPICTUS

Bridgetown BARBADOS ADVOCATE in English 13 May 87 p 1

[Text]

The Ministry of Health is taking steps to keep the *Aedes Albopictus* Mosquito out of Barbados.

Mrs. Athelene Haynes, acting Permanent Secretary in the Ministry of Health told a health workshop that this mosquito posed a threat to the region. The workshop aims to develop and formalise a plan of action for the surveillance and control of the *Aedes Albopictus* Mosquito.

Mrs. Haynes said that while the vector of dengue and its haemorrhagic complications was usually found in the Far East, it had recently spread to more than seven states in the United States and to South America.

"You will therefore appreciate at once the need among us in the Caribbean to be vigilant in preventing the spread of the *Aedes Albopictus* to our islands in view of our trade links with countries known to have the mosquito," she said.

She said the Ministry had responded to the potential danger by intensifying efforts through

the Aedes Eradication Unit and the Public Health Inspectorate generally in house-to-house surveillance, the placing of ovitraps, the monitoring of sea and airports and any other areas considered to be "high risk."

Mrs. Haynes said that in addition to routine monthly inspections at air and seaports, all incoming planes and maritime vessels were checked for evidence of spraying and for the presence of the adult mosquito or its larvae. The Ministry was also notified of all containers entering Barbados so that they could be inspected, she said.

Large measure

She reminded the general public that the success of any health programme depended in a large measure on them.

Mrs. Haynes said: "Community participation, fostered through a vibrant health education programme, is therefore the key to the successful implementation of vector control programmes."

Without such participation, she said, many

Governments would be unable to mobilise the necessary financial and human resources necessary to control vector-borne diseases.

She said that every citizen should consider himself an agent for vector control. "As such, he should assume personal responsibility for ensuring that all debris, bush and receptacles such as tyres, and empty cans — all of which encourage mosquitoes and other vectors — are removed, destroyed, treated or otherwise suitably disposed."

Mrs. Haynes also suggested that there should be no hazards to human beings or domestic animals and that methods used should be compatible with the local Customs, practices and attitudes.

AIDS TREATMENT, STUDY, INCIDENCE, FUNDING REPORTED

AZT Treatment Agreement

Ottawa, THE OTTAWA CITIZEN in English 30 May 87 p A3

[Article by Monique Roy]

[Text]

Between 500 and 600 AIDS patients in Canada will be treated with the experimental drug AZT following an agreement last week with the federal and provincial health ministries and Burroughs Wellcome, the company that manufactures the drug.

Greg Smith, co-ordinator of the National AIDS Centre, said that depending upon the availability of the drug, which is in short supply internationally, the number of AIDS patients treated with AZT will increase steadily over the coming year.

The agreement extends the use of AZT, short for Azidothymidine, to a wider range of AIDS patients, including those who have a variety of viral, parasitic and bacterial infections.

Previously, the drug was available only to patients with a rare form of pneumonia known as PCP, pneumocystis carinii pneumonia.

Although it is not considered a cure, AZT

has been found to be effective in inhibiting the spread of the AIDS virus.

There are now 180 AIDS patients undergoing AZT treatments in clinical tests across the country, said Smith. All of them are suffering from PCP.

"The agreement will improve the situation considerably for AIDS patients," said Smith.

Ottawa General Hospital expects to treat more patients with AZT in the near future as a result of the agreement, said hospital spokesman Ian Sutherland-Brown. About three patients at the hospital now are receiving the drug.

AZT isn't being used at Ottawa Civic Hospital, said spokesman Marilyn McCrea, and it's not certain whether the hospital will in the near future.

AZT also will be available to a select group of patients who have been infected with the AIDS virus. The group will include people whose white blood cells have been affected, but who haven't developed full-fledged cases.

Study of Homosexuals

Toronto THE GLOBE AND MAIL in English 1 Jun 87 p A4

[Article by Joan Breckenridge]

[Text]

Homosexual men who tested positive for the antibody to the AIDS virus were still having multiple sexual partners and many were still

not using condoms routinely near the end of last year, according to a major Canadian study to be released today.

The study, which will be presented at the Third International Conference on AIDS in Washington, shows the median number of partners for this group fell to 5.8 in 1986 from 9.2 in 1984, said Dr. Martin Schechter, an epidemiologist at the University of British Columbia.

The study found that 50 per cent of the group said they used condoms usually or often, up from 4 per cent in 1984. Dr. Schechter considered this to be a dramatic increase.

Among gay men with the greatest number of casual contacts, 44 per cent of the men who tested positive said they always used condoms during high-risk sexual activity, such as anal intercourse, and 7 per cent said they never used condoms.

In addition, 35 per cent of the men who tested negative said they never used condoms and 42 per cent said they always used them while engaged in high-risk activities.

Dr. Schechter called the results disappointing, but he added that "it's a fairly striking change because it was still early on" and acquired immune deficiency syndrome was not yet taken as seriously as it is now.

Dr. Schechter and a research team have been monitoring more than 600 homosexual men in Vancouver since November, 1982, to determine the natural epidemiology of the AIDS virus.

As of May 25, a total of 1,034 Canadians had AIDS and 850 were homosexual or bisexual men. However, acquired immune deficiency syndrome is not a gay disease. It is a virus that attacks the body's immune system and destroys the body's ability to fight off disease.

In the study group looking at sexual activity and condom use, 150 gay men tested positive and 280 tested negative for the AIDS antibody.

When it comes to the positive group, "it could well be they don't care any more," Dr. Schechter said. The other explanation is that many of them are engaged in relationships with men who have also been exposed to the AIDS virus.

With the negative group, "the problem could be that some people, particularly young people, may infer from a negative result that it's OK to do what they've always been doing," Dr. Schechter said in an interview from Vancouver.

"And there's the old invulnerability theory. Young people have a mind set that it won't happen to them," he said. The study has also found that men younger than 30 are twice as likely to be exposed to the AIDS virus than men older than 30.

The decrease in sexual partners was largely confined to men who had developed the AIDS antibody. The median number of sexual con-

tacts for men who tested negative fell to 6.7 in 1986 from 6.9 in 1984.

At the beginning of the study, 50 per cent in both groups had four or more sexual partners and 20 months later they had three or more.

Many of the men are involved in monogamous relationships, Dr. Schechter said.

However, the \$1.4-million study, which was largely financed by the Department of Health and Welfare and will continue until at least 1989, also found that the increased con-

dom use and lower number of partners has helped reduce the spread of the virus in the homosexual population.

During the first year of the study, 28 men became exposed to the AIDS virus, in the second year 38, in the third year 16 and in the fourth year four tested positive.

Dr. Michael Weaver, an immunologist on the research team, said this shows educational efforts are paying off.

"We've got to keep hammering away at the message because we have a long way to go," Dr. Schechter said.

In a concurrent study, researchers found that of 323 men who tested positive for the AIDS antibody when they entered the study, 18.6 per cent, or one in five, had the fully developed AIDS by November, 1986.

Incidence Among Infants

Ottawa THE OTTAWA CITIZEN in English 2 Jun 87 p A3

[Text]

TORONTO (CP) — A baby suspected of having AIDS has been placed with a foster family, says a confidential Ontario government memo obtained by the *Toronto Globe and Mail*.

The Roman Catholic Children's Aid Society is seeking legal advice from the province about the implications of having placed the 10-month-old with the foster family, the newspaper says today.

The child was sent to the Hospital for Sick Children to be tested

for the antibody to the AIDS virus, says the May 22 memo from the Ontario Ministry of Community and Social Services.

Ministry and society officials have refused comment.

Social Services Minister John Sweeney is aware of the case but has no information beyond that contained in the memo, said his assistant, Sam Bornstein.

The mother voluntarily placed the infant and two older children with the society July 30, 1986, be-

cause she could not care for them, the memo says.

The mother has not been tested for the AIDS antibody but there is "some suspicion" she shared hypodermic needles with her sister, a drug user who is in hospital and is suspected of having acquired immunodeficiency syndrome, the memo says. The father is in jail on a drug-related charge.

AIDS destroys the body's ability to fight off disease and is transmitted through semen or blood.

Drug abusers who share needles risk mingling blood.

AIDS can be transmitted by a mother to her child from the placenta during pregnancy, through vaginal secretions during birth and possibly by breast-feeding after birth.

The society plans to tell the

natural and foster parents the child is being tested, the memo says.

The society will provide counselling about AIDS to both families and is looking for a backup foster family in case the current one doesn't continue caring for the infant, it says.

Researchers say even the clos-

est non-sexual contact won't result in transmission of the AIDS virus.

As of May 25, seven Canadian children under age one had been diagnosed as having AIDS, says the Laboratory Centre For Disease Control in Ottawa. Only two are still alive.

Minister: No Mandatory Testing

Toronto THE GLOBE AND MAIL in English 4 Jun 87 p A17

[Article by Mary Gooderham and Paul Taylor]

[Text]

The Canadian Government is not considering mandatory AIDS tests for immigrants, armed forces personnel, federal prisoners or couples getting married, Federal Health Minister Jake Epp said yesterday.

Mr. Epp told municipal politicians in Ottawa for a meeting of the Federation of Canadian Municipalities that they are on the "front line" to combat the spread of AIDS through education and prevention measures.

"Canada has a major AIDS problem," he said, adding that 1,052 Canadians have been infected with Acquired Immune Deficiency Syndrome.

But he told reporters later that he is not prepared to join the United States in ordering or "encouraging" AIDS testing among certain segments of the population.

"We are not contemplating mandatory testing in (any) fields right now," he said. "In Canada we have not made a decision on testing of

any kind relating to AIDS."

Mr. Epp told about 1,200 delegates to the four-day conference that his department and municipal Governments must concentrate more on preventive health care and health promotion, adding that AIDS is foremost among problems they face.

"These are citizens in your cities and they affect your cities," Mr. Epp said. "You're on the front line."

1,052 Cases

Toronto THE GLOBE AND MAIL in English 8 Jun 87 pp A1, A8

[Article by Joan Breckenridge]

[Excerpts]

In Ottawa, a hemophiliac suffering from AIDS dies when his car hits a bridge. Fearful that someone will be infected by the dead man's blood, authorities order immediate incineration of the vehicle.

In San Francisco, buyers refuse to purchase homes once occupied by AIDS patients. Real-estate brokers start demanding proof that a house is "AIDS-free" before putting it on the market.

These are just two examples of a steadily escalating "plague mentality" that North American experts on acquired immune deficiency syndrome say has gripped the continent since news of AIDS invaded the public consciousness in the early eighties.

It is being fuelled by ignorance and by "the incredible fear people have of the disease and of one another," said Dr. Alastair Clayton,

The Centers For Disease Control in Atlanta, Ga., predict that 270,000 Americans will have AIDS by 1991. Extrapolating from the U.S. figures, the agency estimates that 6,700 Canadians will have AIDS by 1991.

It is currently estimated that 1.5 million people in the United States and 75,000 in Canada have been exposed to the virus.

At the beginning of June, 1,052 Canadians had been diagnosed as

having AIDS; of those, 521 have died. Of the total, there were 981 men, 52 women and 19 infants.

Infants can contract AIDS through fetal blood, breastfeeding or during birth.

In both countries, the majority of cases are still found among homosexual or bisexual men. In Canada, 82.4 per cent are in this category; in the United States, 66 per cent.

Hemophiliac Children in Toronto

Toronto THE GLOVE AND NAIL in English 29 May 87 p A10

[Article by Heather Mallick]

[Excerpts]

The AIDS virus dealt a heavy blow to hemophiliac children in Canada before blood screening began 18 months ago, a Toronto pediatrician says.

"They needed the blood and they had to take the chance," Dr. Stanley Read of Toronto's Hospital for Sick Children told a news conference yesterday.

About one in three of the hemophiliac children being monitored by the hospital has been exposed to the AIDS virus and has developed antibodies to it, he said, and similar statistics are being reported at other clinics across Canada. Of the 120 to 150 children ranging in age from a few months to 18 years who attend the hospital's hemophiliac clinic, 35 per cent have been exposed, one has developed AIDS and a few have developed the milder ARC (AIDS-related complex), he said.

Dr. Irwin Walker, chairman of the medical advisory committee of the Ontario Hemophilia Society, said in an interview yesterday that the fear of AIDS is hurting hemophiliac children.

"I'm trying to patch up a situation where a child was almost hounded out of school. Parents were saying, 'Why is my little Johnny in school with this kid?'"

Children are cruel enough when they are healthy, Dr. Walker said, but the AIDS

fears have brought out the worst. "In one case, they were saying, 'Now he's changed from a hemo to a homo.'"

Children who bleed frequently may need transfusions once or twice a week, while other children may need them only a few times in their lives.

There are 2,500 to 3,000 hemophiliacs in Canada, he said, and those with AIDS account for only 1 per cent of the total number of AIDS cases. However, 90 per cent of patients with severe hemophilia, who require more concentrated transfusions, may have been exposed to the AIDS virus, he said.

The children at the hospital have a lower incidence of AIDS because they have been exposed for a shorter period of time than adults, Dr. Teitel said.

There have been 19 cases of children with AIDS in Canada, Dr. Read said, though that figure may be under-reported because the disease is difficult to diagnose.

Those AIDS cases are the result of an "open-fridge" policy before mass blood screening in the fall of 1985, Dr. Read said. Some blood came from the United States, where the risk of contaminated blood was higher and some came from Switzerland, where it was lower. "There was no way of knowing at that time," he said.

Eastern Ontario Children's Hospital

Ottawa THE OTTAWA CITIZEN in English 29 May 87 p B3

[Article by Jeff Heinrich]

[Excerpts]

Half the children suffering from hemophilia at Children's Hospital of Eastern Ontario have tested positive to carrying the AIDS antibody in their blood, the director of the hospital's haematology clinic said Thursday.

Of the 33 children being monitored at the clinic, 16 have developed the antibody, indicating they have been exposed to the acquired immunodeficiency syndrome vi-

rus, said Dr. Brian Luke.

None of the children has yet caught the virus, he stressed.

Luke said 50 per cent "is not an alarming figure." He said it's expected a certain percentage of the children would come in contact with the virus.

Hemophiliacs receive regular transfusions of so-called Factor 8, a blood product made by extracting from donor plasma the spe-

cial proteins hemophiliacs need to clot their blood.

To date, four children in Canada have acquired the virus through blood transfusions.

Since 1982, 515 Canadians have died from AIDS, twelve of them children, according to statistics compiled by the National Aids Centre of Health and Welfare Canada.

Ontario Research Funding

Ottawa THE OTTAWA CITIZEN in English 26 May 87 p A3

[Text]

TORONTO (CP) — The University of Toronto has been given \$1.5 million by the Ontario government to establish a laboratory for research into AIDS.

And the government will also spend \$1.7 million so AIDS victims can get the drug azidothymidine (AZT) for free, Health Minister Murray Elston said Monday. AZT is one of several drugs found to be effective in inhibiting the spread of the AIDS virus although it is not considered a cure.

The funds will help the

university build the province's first isolation facility for the human immunodeficiency virus and will be the reference centre for research into the diagnosis and treatment of acquired immunodeficiency syndrome.

The university is already one of the main centres in Canada for AIDS research. Unsuccessful early research efforts into AIDS concentrated on the restoration of the immune system through the use of agents such as interferon, interleukin-2 and bone marrow transplant. More recent research has focused on development of a drug to inhibit the spread of the AIDS virus itself.

Trials of AZT have been under way in Canada for about six

months and the British manufacturer, as is customary, had been supplying it free of charge. But for several months the firm has pressed the federal government to allow AZT to be sold as a prescription drug. Last month, the federal government agreed to issue a limited notice of compliance, limiting distribution of the drug to clinicians approved to provide it to patients eligible to participate in trial.

Elston said the estimated cost would be about \$1,000 a month per patient, an amount he called "unconscionable" for the Health Ministry to pass on to patients. The drug to eligible patients and all purchases and distribution are to be co-ordinated through Sunnybrook Medical Centre in Toronto.

British Columbia Incidence

Ottawa THE OTTAWA CITIZEN in English 1 Jun 87 p A3

[Text]

VANCOUVER (CP) — More British Columbians are infected with the AIDS virus than were crammed into Edmonton's Northlands Coliseum for the Stanley Cup final, says an expert on the disease.

Dr. Michael Rekart, director of the province's control centre for sexually-transmitted diseases, says there are least 20,000 in the province who harbor the virus, many of them unaware of the fact.

Rekart said there are two reasons why Vancouver is the AIDS capital of Canada:

"The virus probably got here first," he said. "We believe the AIDS virus was in Vancouver before eastern Canada. North-south mobility between Vancouver and San Francisco hasn't worked to our advantage when it comes to AIDS."

Secondly, he said, Vancouver has a "more coherent" gay community than eastern cities.

Today, B.C. has 241 confirmed cases of AIDS — up from 193 at the end of last year. Rekart predicted 200 new cases this year.

Winnipeg Prostitutes

Toronto THE GLOBE AND MAIL in English 30 May 87 p A4

[Text]

Winnipeg police and the Manitoba Government are in a quandary over what can be done to get two prostitutes infected with the AIDS virus off the streets. Police Chief Herbert Stephen said he was told the Provincial Health Act doesn't allow his department to stop the male and female prostitutes, who know they have the AIDS virus, from possibly infecting others. But Health Minister Larry Desjardins said the act does allow police, through health officials, to get infected prostitutes off the streets.

/9274

CSO: 5420/34

MEASLES SPREAD REPORTED CHECKED IN OTTAWA-CARLETON AREA

Ottawa THE OTTAWA CITIZEN in English 29 May 87 p B3

[Article by Annabel Bruce]

[Text]

Health officials in Ottawa-Carleton say a strict immunization policy and health-record system has allowed them to check measles from spreading beyond the 32 currently confirmed cases.

"We're certainly seeing more cases of measles than we have in the past," says Dr. Geoff Dunkley, the region's associate medical officer of health.

"But we still have relatively few cases because of our records system and a high-level of immunization."

Usually, there are 20 cases a year in the region.

Eight of the confirmed cases are at Meadowlands Public

School. Seven other children at the school have the symptoms — fever, coughing, sneezing, light-sensitive eyes.

Rob Dolan, spokesman for the Ottawa-Carleton Health Department, says Meadowlands Public is the only school in the area where there has been a concentration of measles cases.

Ottawa-Carleton's immunization program inoculates 96.5 per cent of its school children.

But when two cases of measles showed up at Meadowlands in the beginning of May, health officials pulled out their records to see who hadn't been immunized recently.

"There were some children in transit," Dunkley says. "They'd just arrived at the school and

were behind in their shots."

In about five per cent of cases the inoculations don't take and the children remain susceptible to measles.

Provincial law requires all children to be vaccinated.

Dunkley says children are exempted from immunization for three reasons: they've had measles before and are immune; they are ill and the serum — a weakened form of the virus — would be too hard on their systems; or their parents might object to immunization for philosophical reasons.

While a measles epidemic surfaced last month in schools in the Outaouais, Dolan says the bug in the Ottawa-Carleton area doesn't necessarily come from there.

/9274

CSO: 5420/35

CANADA

04JAN

BRIEFS

SODIUM CYANIDE DISEASE LINK--Thamesville, Ont.--An informal survey of 150 homes in an area where a truckload of sodium cyanide was dumped 30 years ago has uncovered 46 cases of cancer, a citizens' group says. Twenty-three cases of lupus, nine of birth defects and three cases of multiple sclerosis were also found in the survey in Thamesville, about 20 kilometres east of Chatham, group spokesman Ellen Crayheersch said Wednesday. [Text] [Vancouver THE SUN in English 15 May 87 p A6] /9274

CSO: 5420/35

AIDS LABORATORIES TO OPEN IN MAJOR CITIES

AB241638 Paris AFP in French 1512 GMT 22 Jun 87

[Text] Brazzaville, 22 Jun (AFP)--The major Congolese cities including Pointe-Noire (a port city) and Loubomo (third largest city of the country) will soon be equipped with laboratories for the detection of AIDS (Acquired Immune Deficiency Syndrome) virus, the official news agency, ACI [CONGOLESE INFORMATION AGENCY], reported today, quoting Congolese Health Minister Combo Matshiona.

The minister stated that 60,000 to 80,000 persons have been found to be seropositive following an epidemiologic study carried out in Congo, adding that the national anti-AIDS committee has recorded 60 cases of AIDS patients at an advanced stages of infection since (?1983).

To fight the disease, Congo acquired two specially equipped laboratories in 1985, the minister added. He indicated that foreigners will not be required to produce a health card before entering Congo, explaining "such a measure had been examined and rejected by African health ministers at their recent meeting in Cairo."

/8309

CSO: 5400/198

CHLAMYDIA INCIDENCE REMAINS STABLE, NEW STRAIN DETECTED

New Strain Spreading

Helsinki UUSI SUOMI in Finnish 18 May 87 p 3

[Article by Sinikka Mustonen]

[Text] In Finland we are at present going through a pneumonia epidemic caused by an entirely new microbe. The year before last it made the rounds of the country's military garrisons and this year this strain of pneumonia caused by chlamydia has spread to the entire population throughout the country.

"The disease has been rather mild among recruits. They have had a "flu-like" condition, coughing and fever. But civilians have been seriously ill," Armed Forces epidemiologist Risto Visakorpi said.

The chlamydia microbe is known to be the cause of a venereal disease. But chlamydia psittaci, which breeds particularly in birds, can cause pneumonia. The importing of parrots, among other things, is banned for this reason.

This year chlamydia-induced pneumonia has spread from human to human. But we do not know whether it was originally transmitted from birds—pigeons or pet birds, for example—to humans or not.

Those who have contracted this strain of pneumonia generally suffer for a long time from coughing, fatigue, slight fever, slight head cold and sore throat. But if lung X-rays are taken, changes appear in them that have been caused by pneumonia.

Sometimes the pneumonia is severe, leading to the use of a respirator or ending in death.

"The world's first pneumonia epidemics caused by chlamydia were attested in Northern Finland in 1977 and rather small epidemics spread from one garrison to another in 1985," Visakorpi said.

Antibodies in the Blood

A widespread epidemic among 15-to-20-year-olds was attested through miniature X-rays taken in Kajaani and Suomussalmi in 1978. At first, it was suspected

that it was caused by birds because the patients' antibodies indicated this to be the case. The cultures were not found in migratory birds, pigeons or pet birds.

The latest studies indicate that what is probably involved is something appearing in the entire human population and that this is most commonly chlamydia. Nearly one out of every two middle-aged Finns has chlamydia antibodies in his blood, that is, large masses of people have been exposed to this microbe. But all this did not apparently happen until the 1970's.

What then actually is this new disease?

"It is extremely close to the chlamydia found in birds than that found in the venereal disease. It is, nevertheless, a new microbe," Viikari said.

Number High Despite AIDS

Helsinki HELSINKIEN SANOMAT in Finnish 24 Nov 87 p. 9

(Article: "Gonorrhea Cases Increasing: 20,000 a Year Still Suffering from Chlamydia")

Helsinki It has been estimated that there are 20,000 new cases of chlamydia a year. At present the most common venereal disease, its incidence has not been declining, even though people are being urged to use condoms for the purpose of protecting them from AIDS. "The figures unfortunately indicate that unfortunately, have not changed their sexual behavior," specialist Dr Sirkka-Liisa Valle said.

definite data on chlamydia has only been available since the start of this year because they now have to maintain official statistics on such cases. The Helsinki Municipal Health Office, for example, obtained information on from 20 to 30 cases a week, that is, from ten to three times more than on gonorrhea. Less than 6,000 cases of gonorrhea were reported in 1986 in the entire country.

Chlamydia has proven to be a troublesome venereal disease because it may without any symptoms result in ectopic pregnancy or block the fallopian tubes so that the ovum cannot be impregnated. On the basis of Swedish statistics, we may estimate that about 600 women a year here in Finland will become sterile because of chlamydia. An inflammation diagnosed in time, however, can be readily cured with antibiotics.

It has been noted that chlamydia and other venereal diseases also increase the risk of being infected with AIDS. It is just those white cells that attack the HIV virus in the semen or vaginal fluid that abound in an inflamed mucous membrane.

"Condom Used to Be a Status Symbol?"

Sirkka-Liisa Valle reminds us that condoms do not only protect us from AIDS:

"Using a condom indicates that a given individual cares, care of himself in general. It ought to be a status symbol associated with health care like, for

example, bodybuilding. As regards chlamydia, we may also say that condoms both prevent pregnancy and help women to become pregnant."

Finland at any rate occupies first place in the use of condoms; about 17 million of them a year are sold here in Finland. During the AIDS campaigns of the past 2 years sales volume remained fairly constant, but this year it appears to be increasing by 10 percent.

11.465

CSO: 5400/2478

AIDS SUPPORT CENTER ESTABLISHED IN TAMPERE

Helsinki TIEDONANTAJA in Finnish 22 May 87 p 9

[text] Tampere (TA)--The Tampere AIDS Support Center is to start operating in Tampere in offices rented from the city in early June. The first hours of operation and for making appointments will be Tuesday, 2 June, from 1530 to 1830. The telephone number is 133 134 and it is the intention of the support center to direct those concerned over AIDS to contact it, specifically by phone, so that waiting time is as short as possible. The support center will be open Mondays, Wednesdays and Fridays and phone calls will be accepted Tuesdays and Wednesdays between the above-mentioned hours.

In addition to a testing service, the support center will provide doctor, social worker and job guidance services and later possibly legal, theological and psychological aid. At a press conference on Tuesday support center representatives emphasized that they would be as discreet as possible in their AIDS tests in view of the nature of the disease and the attitudes associated with it. Not even one's social security number will at any point be revealed and spiritual support is promised while waiting for a reply.

Prevention and information will be stressed in the center's activities in addition to the provision of personal support. In addition to this, research activities with emphasis on the social aspects of the situation are being planned. These activities will be completely free of cost and open to other people as well as Tampere residents.

11,466

CSO: 5400/24/8

FINLAND

HUMAN

BRIEFS

AIDS TESTING IN FINLAND --Tammerfors--Health authorities in Finland are planning to carry out general AIDS testing of the population in parts of Helsinki, all of Tammerfors and all of Kotka for the purpose of research. The goal is to test everybody, but nobody will be forced to participate. A nationwide charting of the extent of the HIV virus is not planned. Instead the health authorities will estimate the total spread of the virus through regional sampling. [Text] [Stockholm SVENSKA DAGBLADET in Swedish 26 May 87 p 4] 9287

CSO:5400/2480

GHANA

HUMAN

BRIEFS

ANTHRAX DEATHS ALLEGED--Accra, 23 Jun (AFP)--Some 20 people in northwest Ghana are reported to have died in the past 2 weeks as a result of an outbreak of anthrax. Newspaper reports here Tuesday said the victims died after eating the beef of an infected cow. Medical authorities have warned the public to examine their livestock for symptoms of the disease. [Text] [Paris AFP in English 1503 GMT 23 Jun 87] /9604

CSO: 5400/199

GRENADA

LEUEN

BRITTS

AIDS EDUCATION GROUP--A committee has been set up by the Ministry of Health to carry out an education campaign on AIDS. At a meeting held at the General Hospital last Saturday with representatives from each parish--including Carriacou and Petit Martinique--it was decided that Saturday, July 4 will be designated a national distribution day when pamphlets with facts about the disease will be distributed to every household in the island. Minister of Health, Danny Williams told GRENADIAN VOICE that it has been estimated that the cost of treating one AIDS victim could employ five persons to handle the treatment. So far for the year, two confirmed cases of AIDS have been identified and there are two more cases that are most likely to be confirmed. There were two cases in 1985 and one in 1986. [Text] [St Georges TEL GRENADIAN VOICE in English 9 Jun 87 p 1] /9274

CSO: 5440/113

CAPITAL CONCERNED ABOUT INCREASE IN MOSQUITOES

Georgetown GUYANA CHRONICLE in English 20 May 87 p 4

[Text]

THE increase of mosquitoes in Georgetown has caused some alarm among citizens.

Head of the Vector Control Department of the Ministry of Health, Dr Keith Carter, has said that at present there is "no cause for undue alarm in the city, but residents must be vigilant to prevent a critical situation from developing."

TRANSMIT

The majority of mosquitoes in the city and its environs are the aedes aegypti and the culex quinquefasciatus which do not transmit the malaria parasites. They are however vectors of dengue and filaria and do pose a threat if allowed to breed unchecked. The anopheles aquasalis mosquito is the type that transmits malaria and this mosquito has been found in some parts of the city, Dr Carter said.

The department has called on the City Council to take action to rid the city of breeding grounds for mosquitoes. And the City Council has responded by intensifying its campaign.

CLEANING-UP

An official of the City Council has said that the cleaning of drains, trenches and ditches is going on. A call has also been made for all citizens to assist in this cleaning-up activity, and the Council is asking residents to ensure that their neighbourhoods are tidy.

In addition, Environmental Health Assistants make regular inspections of various areas to ensure drainage canals are not clogged and bushes are weeded. The Council has also started charging people for dumping rubbish on the parapets, in alleyways, drains and on pathways.

If the breeding grounds for the mosquitoes are destroyed then the mosquito population will diminish and so will the possibility of mosquito transmitted diseases affecting citizens, Dr Carter said.

Meanwhile, the Public Health Department has recommended certain measures to get rid of breeding grounds for mosquitoes. These include

- making sure that drains are clean and flowing.
- removing, burying and destroying empty tins and other discarded containers.
- filling up depressions in which pools of water can accumulate.
- covering water receptacles; changing water in vases daily, and
- cutting grass and removing weeds and bushes where adult mosquitoes would find hiding places.

[The Georgetown NEW NATION of 24 May 1987, page 5, notes that the Georgetown City Council has asked municipal authorities for a "detailed report" on their mosquito-control practices. The report concludes: The 'work of the department is being affected by the unavailability of effective larvicide, supplies of which, in previous years, were obtained from Trinidad.]

/9274

CSO: 5440/114

GOVERNMENT CITES PLANS TO COUNTER INCREASE IN MALARIA

Minister's Remarks

Georgetown GUYANA CHRONICLE in English 15 May 87 p 1

[Text]

THE Ministry of Medical Education, Environment and Food Policy hopes to counter the slight increase in malaria cases in Guyana through a number of measures including public education and a spraying programme, Senior Minister Dr. Richard Van West-Charles told the National Assembly Wednesday.

Responding to a question from the Minority People's Progressive Party relating to the incidence of malaria since 1981, Cde. Van West-Charles acknowledged that there has been a general resurgence in several areas of the world including Asia and South America.

This was reflected in the reports of the World Health Organization and the Pan American Health Organization.

In Guyana, while there was a reduction in Region Nine, there has been an increase in Region Seven, the Minister said.

The Ministry, he added, has been collaborating with the Gold Miners Association and other parties to counter the problem.

The number of malaria cases is expected to be reduced with the acquisition of more equipment and drugs, including microscopes and DDT as well as the training of Medex.

Georgetown KIW BATION in English 17 May 87 p 3

[Text]

Guyana is one of the countries to be affected by the global deterioration of the malaria situation.

Responding to a question in the National Assembly, Minister of Medical Education, Environment and Food Policy Dr Richard Van West Charles identified the growing resistance of the malaria vectors to the known drugs, a number of socio-political and human factors, increased equipment cost, and the movement of people, as the major factors leading to an increase in the incidence of malaria.

A report prepared by the Pan American Health Organisation noted that Guyana, Belize and the Dominican Republic had all recorded significant gains in the fight against malaria during the 1970s. This situation regressed due to "the importation of cases from neighbouring countries."

To combat this situation, local health authorities with assistance from Venezuela

and the Pan American Health Organisation have launched an extensive campaign in the so-called problem areas. These areas are in Regions Seven and Eight which borders Bolivar State in neighbouring Venezuela.

The efforts of the local health authorities have resulted in a decline in incidences in Region Nine.

In Region Seven malaria treatment centres have been set up at Enachu, Kamarang, and Issano.

Figures released by the Ministry of Health for 1985 indicated an increase in the numbers of plasmodium falciparum cases — the cases that can be fatal if untreated — compared to cases of plasmodium vivax, a milder form of malaria.

In Region Nine the number of falciparum cases rose from 545 in 1981 to 910. In the Cuyuni, from zero to 636 for the same period and in other hinterland locations, from two to 320.

/9274

CSO: 5440/114

TWELVE DOCTORS, TECHNICIANS FROM CUBA HERE TO ASSIST

Georgetown GUYANA CHRONICLE in English 22 May 87 pp 4-5

[Text]

A team of twelve Cuban doctors and technicians arrived in the country Wednesday night. Eleven of them will serve in the health sector, while the twelfth, a specialist in Occupational Health and Safety, will be attached to the Ministry of Labour.

The twelve are here under the Guyana/ Cuba Assistance programme. They are expected to spend two years here. They have come as replacements for other doctors and technicians who have completed their two-year stint under the same programme.

The team consists of several specialists in various fields, and they are expected to serve in institutions around the country, working along with local physicians and technicians.

There are three specialists in general medicine, two X-Ray technicians, two anaesthetic technicians, one epidemiologist, two ophthalmologists, one ear, nose and throat surgeon and one Occupational Health and

Safety specialist.

The three specialists in general medicine are *Aleyda Garcia Hermanandez*, *Antonio Hechevarria* and *Blanch Rafaela*. The X-Ray technicians are *Renato Soto* and *Ana Cabo Terda*. *Teresa Verdecia* and *Barbara Gonsalez* are the anaesthetic technicians. The lone epidemiologist is *Luis M. Gonsalez*, while *Milacros Carrascosa* and *Zelda Cardova Morales* are ophthalmologists. *Alejandro Diaz* is an ear, nose and throat surgeon, while *Juan Lopez* is the Occupational Health and Safety specialist.

/9274

CSO: 5440/114

BRIEFS

AIDS STATISTICS--To date 29 AIDS sufferers have died in Israel, out of 39 cases, including 1 woman who died as a result of a blood transfusion that was infected with the virus. At a congress of hospital directors held in Hadassah today, it was also reported that 1,500 people in Israel are carrying the AIDS virus. Prof Moshe Mashi'ah of the Health Ministry reported that since it was decided to examine the blood portions in the Blood Bank, some 200,000 portions have been checked: 15 were found to be infected with AIDS viruses. [Text] [Jerusalem Domestic Service in Hebrew 1900 GMT 24 Jun 87 TA] /12624

CSO: 5400/4523

SPREAD OF AIDS SLACKENS

Rome LA REPUBBLICA in Italian 20 May 87 p 20

[Article by Daniel Mastrogiacomo: "732 cases, 100,000 test positive"]

[Text] AIDS is loosening its grip and slowing the contagion of death and fear. The data this time are heartening, a real incentive to make a fresh start in a battle barely joined. The task of interpreting the latest radiographical findings has fallen to Prof Pocchiari, director of the Superior Institute of Health, which is one of the official sponsors of the first national conference on acquired immune deficiency syndrome: Three days of discussion and debate at the EUR Palace of Conferences to assess the situation.

"In the first half of 1986," said Pocchiari, reported AIDS cases numbered 171, and in the second half of that year, 218 cases. From January to the present, the number of people affected by the disease has leveled off at 141. This indicates that the spread of the virus is slowing, refuting the dire predictions of its "doubling every 6 months."

What concerns the experts on the cabinet-level commission summoned by Health Minister Carlo Donat Cattin is the people who test positive for the virus, meaning all those who are carriers of the retrovirus and could transmit AIDS to healthy persons. "The number of subjects who test positive," said Pocchiari, "is still rising. Of a nationwide sampling of 16,000 people who tested positive, 47 percent showed indications of lymphadenopathy (LAS) or of its precursor (ARC)."

The conference was presented with the findings of the first broad-scale national survey of the disease. Organized by the National Organization for the war on AIDS, it involved 48,720 people who came to the 186 centers for diagnosis and treatment now in place all over Italy. Reported cases number 732: of these, 597 are men and 135 are women, 56.4 percent were drug addicts, 24.9 percent are homosexuals, 3.5 percent are hemophiliacs, and 1.9 percent had received multiple blood transfusions. The numbers of children stricken by the virus are increasing, now numbering 31, 29 of whom are children of drug addicts, and two are children of mothers who had had heterosexual contacts. The survey also confirmed the alarming predictions of the cabinet task-force, on being apprised of the army of individuals testing positive for the virus.

"Thirty-three percent of the samples analyzed (16,000 people out of a total of 48,720) tested positive," said Pocchiari. "In any event, these data are not representative of the entire national population, since the subjects who flocked to the centers already suspected that they might have contracted the virus." The numbers, according to the experts, lead to an estimated count of at least 100,000 people who will test positive.

Furthermore, insofar as concerns the category referred to as "at very high risk as a result of their sexual activities" the investigation confirms the continuing flow of warnings from and cabinet commission.

The percentage of drug users affected by the virus (83.5 percent of all cases) rank second only to homosexuals (7.1 percent) and, for the first time, heterosexuals are entering that category: (4.2 percent, or 677 cases out of a total of 16,000, tested positive). One final frightening datum: 50 percent of children of drug addicts present symptoms of the disease.

The Minister for Health opened the conference. Donat Cattin told his audience in detail of the amount of appropriations sought for the war against AIDS: 160 billion for 1977-78, of which 140 billion would go into research and 20 percent into public information. Former Foreign Minister De Lorenzo accused the commission of "putting off mobilization of public opinion and of failing to coordinate action between volunteer organizations and public agencies."

Donat Cattin's retort was a reminder of work already accomplished: "Now complete are eight informative documents for publication and distribution; on 12 June we begin the race to open the health education campaign, and very soon we shall be getting a toll-free SIP number which anyone may call for information and counselling."

6182

CSO: 5400/2475

MORE CHOLERA CASES REPORTED

Kuala Lumpur NEW STRAITS TIMES in English 5 Jun 87 p 1

[Text]

KUALA LUMPUR, Thurs. — The number of cholera cases has passed the 300 mark with 15 more cases reported in the last 24 hours.

The nationwide tally is now 305 since the outbreak in April. A total of 271 of them are carriers, including the 15 identified during the last 24 hours.

Health Ministry spokeswoman Gouy Lee Le said all states in Peninsular Malaysia except Selangor, Negri Sembilan and Malacca have been affected by the latest outbreak.

The cholera-hit States have set up operations rooms to monitor affected areas and carry out action plans.

"At every level, including in the three unaffected States, there is surveillance of diarrhoea cases, especially when there are a lot of cases in one locality," Ms Gouy said.

So far, Kelantan is the worst affected State, with 150 cases and 118 carriers reported. This is followed by Kedah which reported 112 cases and 74 carriers.

Other States are Terengganu (11 cases, seven carriers), Perlis (20 cases, 21 carriers), Perak (four cases, six carriers), Penang (five cases, four carriers), Federal Terri-

tory (two cases), Johore (one case) and Pahang (two cases).

The number of cases has been increasing daily during this outbreak. It is learnt that the worst outbreak was in 1953 when more than 2,000 cases were reported.

The latest cases reported were in Kedah, Perak, Penang, Pahang and Kelantan.

In Kedah, 15 cases were reported, with 12 in Baling and one each in Kota Setar, Pulau Langkawi and Kuala Muda.

Kedah also reported 12 carriers, with eight in Baling, two in Yan and two in Pulau Langkawi.

Kedah Medical and Health Services director Dr Peter Low said health officers were still trying to trace one of the carriers, a 25-year-old Field Force personnel from Baling, to hospitalise him.

In Perak, one cholera case was confirmed in Grik yesterday, bringing the total number of cases in the State to four. The victim is a 33-year-old man.

Perak Medical and Health Services director Datin Dr K.B. Badsha said there were also six carriers and two suspected cases.

The first case was detected in the Krian district last month. She is a 54-year-old

housewife.

Datin Dr Badsha said the patient was now free of the disease but has been advised to remain in the district hospital for the treatment of a urinary infection.

The carriers and suspected cases are warded at the Grik hospital for observation and treatment.

Pahang reported one case of cholera in Temerloh today, bringing the number of cases in the State to two.

In Kelantan, another cholera case was detected today, bringing to 150 the number reported since the outbreak.

Acting director of Medical and Health Services Dr Farouk Masthan said the latest victim was a 12-year-old girl from Kampung Kemumin, Pengkalan Chepa.

Three carriers were also identified. Two are from Kota Baru and the other from Bachok.

Meanwhile, a spokesman of the State Cholera Operations Room said six cholera patients, 20 suspected cases and nine carriers were still being treated at hospitals throughout Kelantan.

In Penang, a carrier was identified in Seberang Perai Utara.

/9274

CS01 5400/4379

40 CITIZENS POSITIVELY DIAGNOSED AS HAVING AIDS

Windhoek THE WINDHOEK ADVERTISER in English 6 May 87 p 1

[Article by Ryan Cresswell]

[Text]

FORTY NAMIBIANS have been positively diagnosed as Aids victims in a country-wide evaluation programme that is still far from complete.

These shocking facts emerged after The Advertiser started making enquiries about the rate at which the deadly disease is spreading locally.

State pathologist Dr Dawid Toerien is supervising the programme and has tested 8 750 people in the country during the last year.

About 33 people have been tested serologically positive, which means that their blood sera revealed the presence of the feared Aids virus.

There are three people in scattered clinics who might have reached the second most serious stage, known as the Aids Related Complex.

A man and a woman in the Caprivi have reached the final and deadly stage called Acquired Immune Deficiency Syndrome.

There are another two men in Kavango who could also have reached this stage.

"We do not know how many people have Aids in this country because we are still evaluating and it is proving to be difficult," Dr Toerien told The Advertiser yesterday.

"Firstly, the people who prove negative may have Aids, but the virus lies dormant for the first six to eight weeks and the tests can show up negative in later stages of development.

"Secondly, the high risk individuals like prostitutes, homosexuals and drug addicts are hesitant to come forward because they have been made criminals by the law. If they would co-operate I could finish the evaluation in two months.

"When they do come forward everything is treated with

the strictest confidence by me. I do not even keep lists of names in my office."

Dr Toerien explained that in southern Africa a patient is positive after two screenings and one confirmatory test. He said some of the people regarded as positive so far were still undergoing some of the later tests.

The pathologist added that at the moment the government covers all the hospital and social costs of an Aids sufferer.

He said he was perturbed by the lack of knowledge about the killer disease displayed by the Namibian public and said a sub-committee had been formed that would soon be circulating pamphlets and posters about the disease.

Dr Toerien said one of the problems in Namibia was that a large portion of the population crossed the borders into countries with a very high occurrence of Aids.

Dr Toerien gave a detailed lecture on the disease to the nursing staff of the Windhoek

State Hospital yesterday.

There are some very thought-provoking aspects of this disease.

If you have had sex during the last six months, you could have Aids.

The virus can stay dormant for years and then have a long incubatory period. Sufferers can live for seventy years.

It is possible to pick up the virus from contaminated instruments. You could get it when you have your ears pierced.

Aids seems to make its victims 'sexually aggressive'. They usually increase their sexual activity rather than decrease it.

In Africa 14 to 20 percent of Aids sufferers are children. Less than four percent of sufferers in America and Europe are children.

People who fear that they might have contracted the killer disease, can contact Dr Toerien between 8am and 10am from Monday to Friday at 225851, extension 18 or 225985, extension 18.

/13046
CSO: 5400/204

GOVERNMENT, RELIGIOUS EFFORTS TO PREVENT AIDS

Kaduna NEW NIGERIAN in English 25 May 87 p 5

[Article by Emeka Anuforo]

[Text]

ACQUIRED Immune Deficiency Syndrome, AIDS, was practically unheard of anywhere in the world until recently when the existence of this killer disease was first mooted in the United States of America.

By the time the existence was confirmed, it had already started taking its toll on the American populace. Later the disease was found in other parts of Europe, Asia and the Pacific, the South Americas and now it has been confirmed that AIDS also exists in some African countries including Nigeria.

The Nigerian authorities have embarked on preventive measures using both moral and medically-oriented campaigns while medics have appealed to the populace to resort to the use of condoms as a preventive measure against AIDS infection.

Christian leaders especially Catholic bishops and archbishops are vehemently opposed to the use of condoms saying it is sinful. They prefer complete abstinence from sex as an AIDS infection preventive. Sex outside marriage, the Catholic leaders argue, is sinful and therefore absolutely condemnable.

Some school of thoughts argue that a strong campaign against promiscuity is a better

method since condoms are not fool-proof against AIDS infection.

Meanwhile, as shivers run down the spines of Nigerians as result of the discovery of AIDS virus in the country, the Federal Minister of Health, Professor Olikoye Ransome-Kuti, has called for extreme caution among Nigerians by desisting from indiscriminate and casual sexual behaviour and intravenous drug abuse.

The Federal Government, however, is not leaving everything to chance. To prevent AIDS infection in the country, the government has allocated 1.5 million Naira for an intensive campaign to educate the populace on the disease and its mode of spread.

In addition, five AIDS screening centres have been established in different parts of the country where people can go for AIDS tests. Again all necessary equipment for detecting AIDS have been installed at the University of Maiduguri Teaching Hospital with well-trained personnel to operate them.

For now, thousands of blood samples brought from various parts of the country are currently being tested at the hospital with about 100 of the samples from prostitutes living in hotels.

On one hand, in a guidance disclosure, the World Health Organisation (WHO) had carefully listed AIDS transmission methods. These include intimate sexual contact with an infected person, transmission through infected blood and blood products, infected mother to child, contaminated unsterilized syringes, and sperm.

On the other hand, the WHO has no documented evidence to confirm that AIDS infection is possible through casual or social contact, food or water, airborne, faecal or oral routes or through insect bites.

Either way, a larger number of opinion believes that the surest avenue to avoiding AIDS infection is the refrain from sexual promiscuity, infected blood transfusion or use of contaminated, unsterilized syringes and needles.

With the Nigerian connection in avoiding AIDS infection, the religious leaders in the country have been fully mobilized so as to spread the 'gospel of moral uprightness' to their followers.

This is sure to be our best bet in preventing AIDS infection in the country.

Latest information, coming from the Federal Minister of Health on the existence of AIDS in Nigeria is quite positive. The minister's latest pronouncement has left no one

in doubt as to whether AIDS is here with us or not. In fact, if there is anything in doubt it is the exact number of people that have since died of AIDS and AIDS-related diseases in the country. It is certain that some AIDS patients must have died un-noticed. This is because a reasonable percentage of our population have no faith in orthodox medication whenever they are afflicted by one ailment or the other.

AIDS-related ailments, at present have no definite cure and in Nigeria in particular, illnesses that defy all cures are often attributed to witchcraft and consequently referred to the traditional medicine-man.

Since these native medicine men have no patients' records, an AIDS patient who dies while receiving treatment from a traditional healer will have no records neither will anybody know what type of illness took the life of such a patient.

For a better coordination of records of this killer-disease in this country, efforts must be made to marry the records of our hospitals with the records of the trademedics. In this case, fairly comprehensive records must be kept through government monitoring units to collect data from traditional healers particularly the records of illness that are AIDS-related.

/13046

CSO: 5400/202

HEALTH MINISTER ON BAUCHI STATE EFFORTS TO COMBAT AIDS

Kano SUNDAY TRIUMPH in English 17 May 87 p 12

[Text]

BAUCHI State has been divided into three epidemiological zones for surveillance in relation to the dreaded disease, Acquired Immune Deficiency Syndrome (AIDS), the commissioner for Health, Dr. Garba Dagauda, said in Bauchi.

He told a correspondent of the News Agency of Nigeria (NAN) in Bauchi that an enlightenment committee had also been set up to educate the populace on AIDS and how to prevent it.

The committee which, he said, had been working quietly, especially in rural areas, had not attracted publicity "because we do not want to scare the people but rely on education and persuasion to keep the disease at bay".

Dr. Dagauda said that presently the state had no diagnostic kit for the detection of the AIDS virus but that it was relying on the Federal Government to fulfil its pledge of giving each state an AIDS diagnostic equipment.

"Once we have this, it will be easy for us to determine the presence of the virus in any person", he said.

He said that the state would enjoy double advantage if the equipment was provided since Bauchi was also served by the University of Maiduguri teaching hospital, designated a centre of excellence for medical research.

The commissioner said that expatriate doctors

were leaving the service of the state government because of low home remittances while their Nigerian counterparts preferred the more attractive service conditions in the private sector.

The commissioner asked the government to intensify the training of indigenous doctors and in the interim seek assistance from the other states of the federation by recruiting doctors willing to serve.

"Until we have a category of doctors willing to serve the state and subject themselves to civil service conditions of employment, the situation will remain the same, Dr. Dagauda said.

/13046

CSO: 5400/202

MEASLE DEATHS REPORTED IN CROSS RIVERS

Enugu DAILY STAR in English 16 May 87 p 2

[Text]

FORTY-SIX children died of measles in Ogoja, Cross River, between January and April 30, this year, as against only two last year, according to the chief consultant in charge of the general hospital, Ogoja, Dr Peter Ogon, and the medical superintendent in charge of RCM Maternity Hospital, Moniaya, Ogoja, Dr Philip Obaji.

A breakdown of the figure shows that 26 children, including those who did not last up to 24 hours in admission, died of measles at the general hospital, while 20 died at the RCM Maternity Hospital, Ogoja.

According to Dr Ogon, 188 children

suffering from measles were treated and discharged from the General Hospital, while 19 were on admission during the same period.

At the RCM Maternity Hospital, 102 children were treated and discharged during the period under review, while 19 were on admission.

Commenting on the high mortality among children as a result of measles this year, Dr Ogon attributed it to malnutrition or under-feeding of children which made them susceptible to diseases.

Dr Ogon explained that an under-fed child could not develop enough antibodies to resist attack by diseases.

He also attributed this year's high mortality to failure by parents to send their children for treatment as soon as they discovered symptoms of measles adding that some of them only brought their children to the hospital when they were at the point of death.

/13046

CSO: 5400/200

BRIEFS

GUINEA WORM OUTBREAK REPORTED IN KANO--Guinea worm outbreak has been reported in parts of Gwarzo Local Government area of Kano State. The area most affected, is Godia Village where adults, children and animals have fallen victims. It was gathered that the disease was caused by unhygienic drinking water which the villagers had been fetching from a pond about a kilometre away from the village. Some people in the village said the disease had been recurring since 1983. However, no lives have been lost. When the state Governor Wing Commander Mohammed Umaru was at village to commission a borehole last week the local government chairman drew his attention to the disease. The bore-hole had also ceased functioning. Recently, some officials of the state Ministry of Health visited the village to enlighten the people on the need to drink clean water. The state Commissioner for Health, Hajia Zahra Salihi said in an interview on Nigerian Television Authority (NTA) Kano programme on Sunday that the state government was aware of the outbreak and had made representations to the federal government for assistance. [Text] [Kaduna NEW NIGERIAN in English 19 May 87 p 16] /13046

MENINGITIS DEATHS IN BORNO--Sixteen people have been killed in a new outbreak of Cerebro Spinal Meningitis in Bulamoduri Village in the Geidam Local Government Area of Borno State. The chairman of the local government council, Alhaji Baba Geidam said in an interview that efforts were on for the construction of a local camp to isolate victims to prevent a further spread. He added that people in the area had already been informed to co-operate with health officials drafted to the area. Meanwhile, he said that the local government area had already spent N23,000 this year on drugs and vaccines to combat the disease. [Text] [Lagos DAILY TIMES in English 4 Jun 87 p 24] /13046

AIDS CASES CONFIRMED--Lagos, 23 Jun (AFP)--Five AIDS (Acquired Immune Deficiency Syndrome) cases have been confirmed in Nigeria, it was learned today outside the national conference on AIDS that began yesterday in Ibadan (north of Lagos). Meanwhile, it has been officially announced that the government has earmarked \$500,000 for sensitizing campaign on the disease. Of the 10,418 blood samples examined, only 14 have tested seropositive. Last week, Kano's medical authorities announced the introduction of AIDS tests for all foreigners arriving at the international airport of that town in northern Nigeria. [Text] [Paris AFP in French 1408 GMT 23 Jun 87] /9604

CONCERN OVER AIDS INCREASE--The NATIONAL CONCORD expresses concern over last week's revelation that the number of confirmed carriers of the Acquired Immune Deficiency Syndrome, AIDS, in the country has risen to 15. The paper warns the Federal Ministry of Health to see this revelation as a summons toward intensifying the campaign to check the spread of the disease. While the CONCORD also calls on the ministry to embark on tests at all points of entry into the country, it urges all Nigerians to avoid casual sexual contacts. [Text] [Lagos Domestic Service in English 0600 GMT 25 Jun 87] /9604

INCREASE IN NUMBER OF HIV-INFECTED PERSONS

560 Cases Reported

Oslo ARBEIDERBLADET in Norwegian 21 May 87 p 3

[Text] (NTB)—HIV infection, which can lead to the disease AIDS, has now been reported in approximately 560 people in Norway. The figure has risen by 80 since this January, i.e. an increase of 17 percent in 4 months.

Sogn og Fjordane is now the only county where there have been no reports of HIV infection. Around 60 percent of those infected live in Oslo. Reported increases were largest in Oslo, Buskerud and Rogaland. Nordland is the only county with fewer HIV-infected people in May than in January.

This information is contained in a status report dated 12 May which was compiled by the National Institute of Public Health (SIFF).

According to the SIFF survey 48 AIDS cases in all have been reported.

Heterosexual

The survey shows that the number of cases where the infection was assumed to have been transmitted through heterosexual contacts, in other words sexual contacts between women and men, doubled. There were 13 cases in this category in January and 26 in May.

SIFF reported that 19 of these 26 people had been infected abroad. Three people had been infected through sexual contacts with intravenous drug users and one was infected by a prostitute in Norway.

Intravenous drug users and homosexual men are still the dominant groups among those infected with HIV. In the May report these groups are almost equal in number and together they account for 381 of the 435 people on whom SIFF has detailed information.

The other HIV-infected people include 21 hemophiliacs, a child whose parents are in the risk groups and four people who were infected through blood products.

Of the 435 HIV-infected people who are included in the SIFF tables, 266 live in Oslo. This is an increase of 60 cases since January, in other words 29 percent.

The survey showed the following figures for the other counties (figures from January in parentheses):

Ostfold 15 (11), Akershus 36 (32), Hedmark 4 (3), Oppland 2 (1), Buskerud 20 (11), Vestfold 7 (5), Telemark 3 (3), Aust-Agder 4 (2), Vest-Agder 5 (2), Rogaland 13 (6), Hordaland 11 (7), Sogn og Fjordane 0 (0), More og Romsdal 2 (0), Sor-Trondelag 11 (7), Nord-Trondelag 2 (0), Nordland 4 (5), Troms 3 (3), Finnmark 1 (1).

The county figures do not include 21 hemophiliacs SIFF decided to exclude from this survey to protect their anonymity.

Military Rejects Mandatory Testing

Oslo AFTENPOSTEN in Norwegian 3 Jun 87 p 12

[Text] The chief of the Armed Forces has decided that there will be no mandatory AIDS testing of military personnel. According to defense headquarters the military finds no reasonable grounds for routine screening of this kind now. The Medical Corps will keep in close and continuous contact with civilian authorities and experts, however.

6578

CSO: 5400/2479

NEW STRAINS OF MALARIA FOUND IN ISLAND

Colombo THE ISLAND in English 13 Jun 87 p 10, 15 Jun 87 p 6

[Article by Manel Tampoe]

[Text]

In 1963 there were only 17 reported cases of malaria in the island and there was euphoric feelings that this scourge had been virtually eradicated by means of DDT. The emergence of DDT-resistant strains of the *Anopheles culicifacies* mosquito within a few years belied that optimism, and has served to change the perception of the problem from a simple to a complex equation with a number of hitherto unsuspected factors that have far reaching biological and ecological implications.

In the last few years mosquito-related diseases have re-emerged, quietly at first, but last year there were noteworthy outbreaks of the common variety of malaria — *Plasmodium Vivax* — in several parts of the island, Polonnaruwa, Hingurakgoda, Dambulla, Medirigiriya, Kolakawadiya, Kalukele, Kahlagala, Dimbulagala, Aralangawela, Pimhurettawa, Ellewewa. (Island,

18.9.86) In addition a particularly virulent form of the disease, cerebral malaria — *Plasmodium Falciparum* — has been reported as well as another dreaded mosquito-derived disease transmitted by the *Culex Tritae* Niorhynchus species, Japanese Encephalitis, hitherto not found in Sri Lanka; there have also been cases of dengue and haemorrhagic dengue fever, transmitted by the *Aedes Aegyptii* and *Aedes Albopictus* mosquitoes.

Puttalam reported an outbreak of malaria in July 1986. The Anti-Malaria Campaign (A.M.C.) detected 518 cases of malignant cerebral malaria at the Puttalam hospital and positive cases were reported from the outlying rural villages of Nawagattegama and Anamaduwa. (Island 8.7.86) Positive malaria cases were treated at the Polonnaruwa hospital and, according to the D.M.O. both *Plasmodium* and *Vivax*

varieties found there were malignant.

The Director of the M.R.I., Dr. Tissa Vitarana said that malaria had increased from 20% to 70% in the Mahaweli areas in the first half of 1986. Present also were *Plasmodium Falciparum* that carried the fatal cerebral malaria and there was Japanese Encephalitis in the Mahaweli area. He warned that.

"If they are not arrested they can result in the work of the Mahaweli coming to a standstill, threatening at worst, the very continuance of the project". (Sun. Ob. 9.11.86).

Warning

In the urbanised S. W. coastal belt there is filaria, caused by another species of mosquito, *Culex quinquefasciatus*, which breeds in stagnant, filthy water such as you find in blocked drains, damaged septic tanks and cess pits. "The unprecedented, unauthor-

ised urbanisation taking place in the country today has created serious problems (for the) filariasis control effort" said Dr. Lalith Mendis of the Anti-Filaria Campaign (A.F.C.).

"The disease is now under reasonable control. But it could become unwieldy if the haphazard urbanisation continued".

This was confirmed by the Secretary to the Ministry of Health who described filariasis as a major health problem in the country. "There are 250,000 filariasis patients under treatment in the so-called filariasis belt", he said, "according to Health Ministry statistics". (CDN 10.10.86). Though there is no yellow fever in Sri Lanka we do have the *Aedes Aegyptii* species of mosquito that is the vector for yellow fever in other countries.

The Health authorities have been monitoring the situation through special units such as the Anti-Malaria Campaign and the Anti-Filaria Campaign and the M.R.I. In

fact it is these units that have alerted the country to the lurking menace but funds at their disposal are limited and they are also constrained by the terms of the aid they get. There are weaknesses in their organisational structures and management procedures. For instance there was the matter of the improper storage of malathion which resulted in its catching fire two years ago. During the Puttalam malaria outbreak the A.M.C.'s effectiveness was restricted by a shortage of field assistants and in September when there was an outbreak in the Polonnaruwa, Ilingurakoda, Medirigiriya areas the A.M.C. was hampered by an acute shortage of microscopists to analyse blood specimens. (Island 18.9.86) It is clear that these units are not really geared to cope with even a minor epidemic of malaria or control filaria and it is doubtful whether the Health Department has even formulated strategies to deal with a high incidence of Japanese Encephalitis or haemorrhagic dengue fever if they should occur.

Complacency

In the welter of other problems the country is faced with the threat posed by mosquito caused disease vectors is not receiving due attention today. We have only to recall the menace that malaria used to be in this island during the earlier part of this century to comprehend the dimensions of the problem that could confront us once again if we persist in our complacent attitudes.

In the early part of this century malaria was Sri Lanka's chief health problem. It was characterised by periodic exacerbations varying from 5 to 10 years with epidemics occurring in 1906, 1911, 1914, 1919-20 (though this time it coincided with an influenza epidemic as well) 1928-29 and 1934-35. In 1906 the malaria toll was 26,000 lives and in 1911, 37,000 lives. The 1934 epidemic was however of exceptional magnitude and intensity and included two distinct waves of mortality. The worst affected region was the North Western Province, but the stricken areas included the Western Province from the Kelani river to the Maha oya and even certain areas of the Sabargamuwa and Central Provinces. Colonel Gill, an expert summoned by the Colonial government stated in the report he submitted that malaria had destroyed 80,000 lives in the space of seven months. He said.

"Although all the parts (of the island) were affected, over an area embracing nearly one-fourth of its area and almost one-third of its population the violence of the epidemic was extreme and in this area which includes some of its fairest and most thickly populated districts scarcely a single individual escaped. The havoc wrought by the epidemic is not limited to the sickness and mortality by which it was attended. Prior to the onset of the epidemic scarcity and famine, consequent upon a prolonged drought, prevailed in many parts of the island and to the misery and distress occasioned by

the universal sickness must be added the dire evils of privation and starvation.

Disaster trail

"Even this recital does not complete the tale of the disaster, it takes no account of the material loss due to the interruption of trade and business or of the paralysis of village life which led to the almost complete cessation of agricultural operations for a prolonged period".

Worst-affected

Kegalla district was one of the worst affected areas and at the peak of the epidemic the Kegalla hospital was treating on the average 1000 cases of malaria a day. 1500 persons sought treatment at the OPD on January 1st 1935, 1,180 on the 3rd and 1200 on the 4th. On Christmas Day (25.12.34) the entire staff of attendants at the hospital collapsed and all the work had to be done by the medical officer, apothecaries and nurses. A bulletin issued on the 7th January, 1935 stated that the number of malaria cases treated in the other hospitals in the region were: Rambukkana 511, Karawanella 707, Mawanella 730, Pindeniya 404, Warakapola 441, Nelundeniya 624; it was reported that children and expectant mothers were dying by the hundreds most of the deaths of infants being due to convulsions. The supply of quinine ran short resulting in patients getting relapses, some even three or four times. These patients lost faith in quinine and reverted

to ayurvedic remedies and various forms of folk medicine. There was an acute dearth of hospital accommodation and no arrangements for convalescent care so that some patients discharged from the Kegalla hospital were found lying in an exhausted state by the roadside. To meet this contingency several makeshift emergency hospitals were opened in school buildings, and in Kandy the barracks were converted into a temporary convalescent home.

The situation in the villages was graphically described by Mr. E. A. P. Wijeratne, M. S. C. in a letter to the press dated 3.1.35:

"It was only at the beginning of December that the authorities became aware of the serious hold which the disease was beginning to have on the people. Immediate inquiries were set on foot and it was discovered that in practically every village, particularly in those areas bordering the Maha Oya the majority of villagers were falling victims to the disease. In some villages such as Dombemada and Porape 80% of the people were stricken with malaria for in those two villages out of a total of population of 1500, no less than 1200 were found to be having fever. In the village of Hewadiwala out of a total of 2000 no less than 1500 were found to be ill. In the course of December the situation became gradually worse and rest of the district began to be affected so that today within one month out of a total population of nearly 265,000 people no less than 250,000 have been attacked".

Eye-witnesses accounts

In another letter to the press Mr. J. N. Jinendradasa has left us an eye witness account of the situation in the village of Deewala in the Kegalle district to which he went with a party on a mercy mission.

There was no one well enough to carry the bags of provisions they took so that they had to carry them themselves. Even the bhikku who accompanied them had to carry a bag on his shoulders.

The conditions were appalling. At ordinary times Deewala was a beautiful Kandyan village nestling on the hills with terraced paddy fields in the valley. There were nearly 400 dwelling, a few well-to-do. But the inmates were all down with fever. This is the first time that malaria seems to have attacked the village and the disease was thriving on the virgin soil.

[Continuation]

That the newspaper reports were not exaggerated were evident to us all round. In one home a father and son lay ill and helpless. Hard by was the corpse of the mother. On her side was sleeping a living infant.

"In another house was a woman dazed. Her two children lay sick. She refused the help we offered. Her husband and child had died the previous week and she did not mind the death of the rest.

"In another house

was a sick family who had no food for three days. The Government had distributed food on two occasions. This family had not received anything as there was no one well enough to jump over boulders and fences to go to the distributing centre.

"We visited nearly 300 homes and in each a harrowing tale could be heard. There had been over a 100 deaths in the village. The terraced paddy fields which looked green were dying and cracking as there was no one to lead water. There will be no harvest for 1935. (CDN 5.1.35) Relief work was carried out by many private individuals and agencies of which the most far-reaching was the work done by the Suriya Mal Movement, the nucleus of the LSSP. Malaria did not reach epidemic proportions in Colombo but there were cases in the Mattakuliya, Grandpass, Wellawatta areas

with 185 deaths from malaria for 1934. The Colombo Municipal Council carried out a hastily conceived scheme to oil the city's waterways. On these measures the M.O.H. Colombo, Dr. C. V. Aserappa commented:

"The recent malaria epidemic which threatened the city demonstrated how inadequately we are prepared to meet such a menace. There was no anophelene survey of the city available and in the absence of such information several thousands of rupees were spent, much of it uselessly, in a somewhat blind and indiscriminate oiling campaign. If this department had

the service of a epidemiology officer, the Council should not have found itself in such a helpless position. In matters of public health, cheapness is the enemy of economy and is directly opposed to the interests of the people".

The picture has not changed fundamentally after a fifty-year interval. But our perspectives and strategies should have. Some of the factors such as the periodical occurrence of drought are beyond human control though we have exacerbated the problem with our widespread forest destruction and large-scale development schemes.

Nutritional standards remain poor so that forty years after independence the Minister of Health had to admit in last year's Budget discussion "Malnutrition existed in the country to a disturbing extent". (CDN 15.11.86).

Mosquito-derived diseases are part of Nature's environment-man animal world relationships; they are possibly components of Nature's intricate designs to keep certain categories of population that include man in check so that what we are engaged in is a perennial contest with the mosquito population in which there are no scientific means to help us to eradicate them totally much as we would wish it. What we have to do is to maintain our superiority in the contest by efficient mosquito control methods, by good environmental management and proper sanitation with active public co-operation and

on the other side ensure that the economic cake is more equitably shared so that with better living standards and proper nutrition the lower strata of the population can develop resistance to these diseases.

What is required is the interlocking of the Health for All by 2000 A. D. Programme with an Environment Master Plan to provide a multi-disciplinary mosquito control unit to work out a flexible strategy that is not aid-dependent because the chief interest of aid giving agencies would be to promote their trade in insecticides and that will involve the country in serious ecological and even health consequences.

We need to lessen our reliance on insecticides but achieve an equivalent reduction in the population of mosquito species by efficiently managed operational units comprising sufficient trained officers for surveillance and laboratory testing and teams of public health workers to ensure the necessary standards of public hygiene and research workers to co-ordinate the various aspects. It is necessary to reiterate that in matters of public health, doing things cheap is the enemy of the economy and is directly opposed to the interests of the people. If we do not want to see the population of this country laid low once again by the scourge of mosquito-derived diseases, money has to be spent but it must be channelled into ecologically sound channels so that we may have health for all in a sound environment.

COUNTRY SEEN UNPREPARED TO HANDLE 1990'S AIDS SITUATION

Stockholm SVENSKA DAGBLADET in Swedish 18 May 87 p 10

[Article by Eva Wrange: "Sweden Not Prepared for AIDS Care in the 90's"; first paragraph is SVENSKA DAGBLADET introduction]

[Text] Sweden lacks preparedness and even plans for AIDS care after 1990. The Association of Swedish County Councils issued an alarming report at the beginning of 1986. It was met with skepticism by health care personnel. Since then the planners have laid low.

In the long term report they estimated a rate of doubling annually until 1990, and then nothing...

"It is not meaningful to calculate farther ahead," said Hakan Nilsson, who had the main responsibility for the county council association's part of the long term report-87.

But the epidemic in Sweden continues. Until the first of the year 360,000 Swedes had allowed themselves to be tested and until today the National Bacteriological Laboratory (SBL) has discovered 110 AIDS patients and fully 1400 HIV infected persons.

5,000 Infected Persons Hidden

That means that an obscure number of at least 5,000 Swedes are walking around with AIDS without daring or caring to know about it.

"There is no doubt that within five years the AIDS epidemic is going to bring very high costs," said Claes Herlitz, coordinator of health care and illness research in the Dales Research Council.

Together with the Institute for Social Medicine at Uppsala University he is investigating the AIDS epidemic in health care and in society. The latest report came late last fall and dealt with the situation in the spring of 1986.

It calculated the cost for AIDS care in Sweden during the year April 1985 to May 1986 in direct sick care and blood tests at 54.6 million kronor. That is 0.067 percent of the total health care and sick care costs (81 billion).

"But that is only the direct sick care costs. The indirect costs of AIDS are considerably higher."

Larger Part Indirect

An American study by A. A. Scitovsky shows that fully 75 percent of the total costs of the epidemic consist of indirect costs resulting from too early deaths (see diagram). The direct sick care costs make up only 12 percent of the total cost of AIDS.

If one used the same model for AIDS in Sweden the costs would be 454 million kronor per year. The Association of Swedish County Councils estimates an increase in sick care costs of 0.1 percent per year to take care of the AIDS epidemic until 1990. Today it is only 81 million kronor per year.

"The cost of preventive measures such as information and education, plus expansion of care for drug addicts, has so far widely exceeded the direct cost of sick care, confirmed Claes Herlitz, who is critical of the AIDS campaign.

For several reasons.

Simplified Campaign

"I do not believe that there is a scientific basis for the information campaign going out to the households. The explanation that kissing is not dangerous should be simplified."

SVENSKA DAGBLADET has learned that the government has spent 60 million kronor through its AIDS delegation on the advertising and information campaign about AIDS.

"Furthermore it is doubtful whether the campaign is having the desired effect. It is one thing to get information, and something entirely different to change one's sexual habits. For example the statistics on clamydia show no change of trend."

Just now Claes Herlitz' research group is investigating attitude changes in connection with AIDS on the part of several different professional groups, including nurses.

"There is a lot of fear among many people in health care, because we are still not sure how the infection is spread."

Beginning of an Epidemic

The number of new cases per unit of time is still increasing very rapidly, and from all indications Sweden is just at the beginning of a severe epidemic, according to the research report of December 1986.

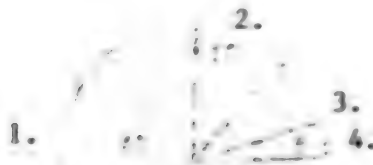
"And how much should be invested in intensive care for patients who are going to die anyway?"

The question somewhat exposes the problem. Together with the previously discussed sharply increasing costs for care, the expanding fear among sick care personnel and the uncertain effects of the campaign, it can be seen that Sweden is at a critical point.

Which way will we choose?

"In Sweden we have always had final care. Now they are trying to go over to open care, but there is a risk in going over too fast. I believe that the Association of County Councils should have dared to propose development alternatives for after 1990. One need not be especially radical to understand what difficult social problems we are dealing with."

COSTS OF AIDS



Captions: The American A. A. Scitovsky estimated that the total cost of AIDS to American society in 1985 would be four billion. But he estimated too low. The sick care costs alone were double that amount, one billion dollars.

These figures and their allocation are not directly translatable to the Swedish situation, but they give an impression of the size of the indirect costs of AIDS.

- Keys:**
- 1. Indirect costs because of deaths \$3,000 million
 - 2. Sick care costs \$500 million
 - 3. Research and information \$300 million
 - 4. Increased ill health \$200 million

Reported Cases of AIDS in Sweden

1. AIDS
2. "Largest under control"



Caption: Until today 110 Swedes have become ill with AIDS, 34 of these are already dead. Fully 1,500 are confirmed infected with HIV and at least 5,000 Swedes are walking around with the infection without daring or wanting to be tested.

- Key:
1. Dead
 2. Ill
 3. "Situation under control" (National Social Welfare Board)

MUNICIPAL AIDS TEAM SAID TO VIOLATE SECRECY LAWS

Stockholm SVENSKA DAGBLADET in Swedish 17 May 87 p 6

[Article by Eva Wrange: "AIDS Group Registering Drug Addicts"; first paragraph is SVENSKA DAGBLADET introduction]

[Text] In two months eight HIV-infected persons have been discovered in Hudiksvall. Two of them were found outside the risk group that the municipal AIDS team produced, and they were persuaded to allow themselves to be tested. In order to find the HIV-infected persons the AIDS team violated both the secrecy protection and registration prohibitions.

"Drug abusers are still the driving force of this epidemic. It is disloyal to allow such disturbed people to bear the responsibility for such a serious disease," said Chris Barrett.

He and two other treatment assistants who worked for a long time with addicts in Hudiksvall took the initiative last fall for a municipal AIDS team. The decision for it was made in the municipal council in November of last year.

Since then the AIDS team, with the help of health journals, police reports, social welfare and court cases, have produced and registered a risk group for AIDS.

Thereby the group is violating both secrecy protection and the prohibition against registration.

"I have received no report about this, but it sounds bad about the registration," said municipal council spokesman Agneta Brendt-Larsson (Social Democrat).

The AIDS team has cooperated with personnel from the police and the criminal, social welfare and health care. It was in cooperation with them that they mapped the location of the addicts in Hudiksvall who injected drugs during the 80's.

Since then those who were registered have been sought out and persuaded to allow themselves to be AIDS tested. A doctor has conducted all the tests and

someone from the AIDS team has been present during the test and when the tested individual received the results.

"In this way we have gotten around the prohibition against registration and the demand for anonymity protection."

The AIDS team is demanding that the entire municipality now be tested for AIDS. Together with cooperating groups they are working out a proposal for general AIDS testing in Hudiksvall, a sharp increase in information in the schools and a special blood bank.

"The condom campaign by the AIDS delegation is purely for show. It is as though they are dealing with colds."

Opposition leader Marianne Ahlqvist is not disturbed about possible law violations.

"The law is too mild in dealing with AIDS. One cannot deal with it on a voluntary basis."

Supervising Doctor Goran Lekas at the infection clinic in Gavle, under which the HIV infected are sorted out, is also positive toward the work of the AIDS group.

"We are in a stupid situation. Drug addicts are a risk group. It is good that someone is taking the responsibility to seek them out. The law is not practical from an epidemiological standpoint. It hinders us from giving direct personal information to those who need it."

9287

CSO:5400/2480

VENEREAL DISEASE TESTING TO BE EXPANDED IN STOCKHOLM

Stockholm SVENSKA DAGBLADET in Swedish 13 May 87 p 12

[Article by Ingrid Eriksson: "County Council Introduces Clamydia Tests", first paragraph is SVENSKA DAGBLADET introduction]

[Text] Stockholm County Council will expand testing in order more easily to discover the venereal disease clamydia. The tests will be given in connection with giving advice on preventive measures at the treatment centers and gynecology reception centers.

The politicians in the Stockholm County Council made that decision at their meeting on Tuesday. At the same time the council decided on more information for men about clamydia. That information will be given out for example at health tests and on entering the military service.

Left-Party Communist (VPK) Proposal

It was VPK member Herta Fischer who made the motion proposing expanded clamydia testing.

"Clamydia gives no symptoms of illness and it is therefore especially important to trace it," emphasized Herta Fischer. "It concerns young women and their future, since clamydia so often leads to sterility."

Just now clamydia is the most commonly occurring sexually transmitted disease in Sweden. The largest risk group is women under 25.

Herta Fischer considered it to be obvious that the testing would be free of cost, and she was supported in that by the Social Democrats.

"Clamydia is increasing among young women, and above all among those under 18," said Elsemarie Bjellqvist (Social Democrat). "For them and for boys of the same age it is a considerable amount to spend 50 kronor for a test. It is an economic investment in the future to make the testing free so that we will really reach the youths."

Cost Investigated

But county council health advisor Bo Konberg (Liberal Party) did not want to promise free testing. Instead the costs for the tests should be investigated further.

"We live in a world with limited resources," said Konberg. "Therefore we cannot just promise that the county council will pay for all the costs. Instead we must for example investigate the possibility of the state paying for a part of the costs."

Mammography in the Fall

The County Council will begin mammographies for women over 40 in the fall. But there is a shortage of qualified personnel, and there must be a test of whether the activity can be conducted entirely or only partly by themselves.

This was announced by public health advisor to the County Council Bo Konberg (Liberal Party) in the council debate. He also promised that despite the lack of personnel the tests would be conducted in accordance with the recommendations of the National Social Welfare Board. They intend that women between 40 and 54 will be tested every 18 months, and women over 55 will have their breasts X-rayed every other year.

9287

CSO:5400/2480

DOCTOR CHARGES SUPPRESSION OF RABIES INCIDENCE

Istanbul GUNAYDIN in Turkish 23 Mar 87 pp 3, 9

[Article by Bilal Ozcan: "Rabies Concealed"]

[Text] Dr Arikan Gurel, director of Rabies and Pathology Laboratory of the Pendik Institute of Veterinary Research and Disease Control said that the cases of death from rabies in our nation are being kept from the public.

Dr Gurel reported that at a meeting held a while back, Governor Nevzat Ayaz said, "It was gratifying to note that there were no deaths from rabies in Istanbul in 1986." Dr Gurel said:

"I could not contain a chuckle when the governor spoke these words at the meeting for discussions on the general health of the province. The provincial health commissioner, sitting next to me, asked, 'Why are you laughing?' I said I was laughing because I knew the truth. But the subject was dropped. The governor did not know because the truth was probably not told to him. In 1986, 1,014 citizens applied to our laboratory with suspicion of rabies. The rabies virus was found in 229 cases and, although they were inoculated, 6 people died. This is not in the public records."

Noting that he had angered several high level people because he had announcements aired on radio and television to warn citizens when incidents of rabies reached the institute, Dr Arikan Gurel said:

"Such great danger cannot be prevented by secrecy. The number of deaths from rabies in the nation, presented in the report sent to the World Health Organization by the Ministry of Health every year, is only half of the correct figure. According to last year's report, only 50 in 1,000 cases of bites reported in Turkey resulted in death. Whereas, the correct ratio is 100 in 1,000 cases."

12816/6662
CSO: 5400/2470

ZAIRE

HUMAN

ANTI-AIDS MEASURES REPORTED IN ZAIRE, CONGO

AB221944 Paris AFP in English 1538 GMT 22 Jun 87

[Text] Kinshasa, June 22 (AFP)--The Zairian Government handed out free condoms here Monday as part of a nationwide campaign aimed at increasing awareness of the killer disease AIDS (acquired immune deficiency syndrome).

An information campaign in Zaire's four vernacular languages--Lingala, Swahili, Kikongo and Tshiluba--will accompany the campaign carried out in the official French language, the project coordinator said.

The campaign has been funded by the Rockefeller Foundation.

In Brazzaville Monday, the official news agency ACI said that all the principal cities of the Congo will have testing facilities for AIDS in the near future.

Health Minister Combo-matsiona, quoted by ACI [Congolese Information Agency], said that between 60,000 and 80,000 people had been found to be carriers in the Congo, with a total of 600 cases of the full-blown disease having been detected since 1983.

Mr Combo-matsiona said that foreigners visiting the Congo did not need to carry a health card establishing that they did not carry the virus. "The proposal was discussed and ruled out by African health ministers at their recent meeting in Cairo," he said.

/8309

CSO: 5400/198

CHIVI DISTRICT HIT BY TYPHOID OUTBREAK

Harare THE SUNDAY MAIL in English 24 May 87 p 10

[Text]

TYPHOID has struck hundreds of people in the Chivi district of Masvingo province, the Chivi district administrator, Cde Felix Mhishi, has said.

In an interview with The Sunday Mail on Wednesday, Cde Mhishi said: "There is an outbreak of typhoid in the Takavarasha, Mubira, Rejena and Swanya areas, and the situation is made worse by the fact that there has also been a severe drought in this district, which makes it very difficult for us to quickly contain the disease.

"People have no water with which to drink their tablets, and we have had to close a clinic here at the Chivi Administrative Centre as a result."

Cde Mhishi said that the medical team from the district was working flat out in an effort to bring the disease under control, "but there have been further outbreaks at Makovero, 20 km from here and that makes life more difficult".

The Chivi Clinic which caters mainly for maternity patients had to evacuate all its patients and transfer them to Chivi Rural Hospital, about 12 km from the

administrative centre, which seems to have sufficient water taps with the thousands of patients needing medical attention.

Water rationing had since been introduced in the district with people getting water from the boreholes that were still operating twice a day — early in the morning and at dusk. They have to queue up for an hour each morning and another hour in the evening. The water they get is not sufficient to meet all domestic needs.

"The situation is made much worse by the fact that the people in the villages surrounding us, especially in Takavarasha, have not built latrine toilets because of ignorance and poverty. Due to the drought, people would rather spend their money buying supplementary food than on cement to build toilets. And with the typhoid outbreak, you can imagine how serious the situation becomes. Building a toilet becomes a luxury," Cde Mhishi added.

The only consolation was a number of public works projects — water related ones have been introduced so people try to work

for food.

"Chivi is between two major rivers which rise from Zimbabwe's relatively high rainfall area, but this year, there was hardly any rain to talk of. Therefore, although we are a naturally dry area, we are suffering this year as the Turgwi and Runde rivers are virtually dry. So we are trying to build dams, sink more boreholes with the limited funds we have, and the people are helping in return for money for food."

Cde Mhishi blamed the lack of water in the area to long planning. "Had we built enough dams to irrigate the crops and from which people could draw water to drink, this present water crisis could be non-existent. That's why people are eager to get involved in the public works projects to build as many dams and weirs as possible."

Work on a \$100 000 weir to increase the water supplies to Chivi is scheduled to begin in July. "This should go a long way to help the 150 000 people in this district, three-quarters of whom face hardships as a result of the drought."

CHILE

ANIMAL

FOOT-AND-MOUTH OUTBREAK REPORTEDLY SPREADS

Santiago EL MERCURIO in Spanish 21 May 87 p C9

[Article by Aquiles Melendez Cabello and Elizabeth Berrios]

[Text] Curico--The deputy minister of agriculture, Jaime de la Sotta, was in Curico to inspect measures taken concerning sick cattle in El Zino. He was worried about the situation because this seems to be the first outbreak to originate in animals other than summering ones.

Although the cattle were in mountain pastures, they were checked several times and authorized to come down to the plain. It is assumed that they contracted the disease from contact with unreported sick cattle.

The manager of El Tattersall in Curico, Jaime Diaz, reported that if the health barrier were placed south of the Teno River, the livestock show in that town could function without problems this week. El Tattersall administers the Curico and Teno livestock shows in this province. Monday the local livestock show was only allowed to auction off animals for slaughter. On that same day, two trucks carrying cattle to the livestock show were sent back to their farms. The cattle were suspected of having foot and mouth disease. However, examinations proved negative.

The 62 cattle in El Zino that have foot and mouth disease were slaughtered Monday afternoon and buried there, using the town backhoe.

Final Report

The final report by SAG [Agriculture and Livestock Service] on the threatened zone of Los Nicheas is expected to be finished by this morning.

It was also learned that the national board of the SNA [National Agricultural Association] headed by president Jose Moreno Aguirre, secretary general Raul Garcia, and director Patricio Montt will arrive in Curico today. The director of SAG, Alejandro Marchant, will also come to this city.

All these people will learn on site about the control of foot and mouth disease in Los Nicheas. They will then report to the press on what they have seen and the measures to be adopted.

The executive director of SAG, Alejandro Marchant Baeza, was informed about the measures in effect in the Los Niches zone east of this city to control an outbreak of foot and mouth disease on Parcel No. 8 of the El Zinc project. He briefly visited this city yesterday morning and then continued to Linares.

Yesterday SAG adopted measures to establish a health barrier south of the Teno River or south of the Lontue River. Halogen light was needed at the Teno River one, but it did not have it. They will decide in the next few hours where the barrier will be set up after they receive the report by SAG veterinarians on the scope of the outbreak of foot and mouth disease in El Zinc.

Cost of Campaign

Talca--Approximately \$1.2 million have been invested so far in the Ministry of Agriculture's campaign to eradicate the outbreak of foot and mouth disease that affects the Maule Region and has spread to other parts of the country.

This was reported here by the deputy minister of agriculture, Jaime de la Sotta, who is directing the actions of the SAG plan. He traveled again to the zone to learn about the situation in Los Niches in Curico Province where some 60 cattle were slaughtered.

7717

CSO: 5400/2061

BRIEFS

CATTLE SLAUGHTERED--Talca--Two farmers appealed to the Supreme Court about the SAG [Agriculture and Livestock Service] measure to slaughter some 600 animals owned by the two. They were to be slaughtered because a source of foot and mouth disease was discovered on the Litu estate in Pencoahue. This appeal was made immediately after the Talca Court of Appeals rejected the appeal to prevent the slaughter of the cattle which include 268 pregnant cows. SAG immediately began to carry out the measure. The number of animals slaughtered is not known. However, before the slaughter was suspended by the court, graves had been dug on the Litu estate to bury approximately 200 cattle. A new outbreak of foot and mouth disease detected in Linares Province yesterday forced SAG to slaughter 168 cattle in Santa Elena, Yerbos Buenas commune, in the northern part of the province. [By Maria Elena Arroyo and Enrique Gutierrez] [Text] [Santiago LA TERCERA DE LA HORA in Spanish 4 Jun 87 p 9] 7717

CSO: 5400/2061

FOOT -AND-MOUTH DISEASE OUTBREAK IN IZMIR

Istanbul HURRIYET in Turkish 24 Mar 87 p 4

[Text] Izmir (HURRIYET NEWS AGENCY)--It was reported that unless urgent precautions are taken, cases of hoof-and-mouth disease found in cattle feed lots in Izmir and its surrounding areas could spread first to the whole region then to the whole nation. It was also said that this disease is stransmitted through cattle imported by several companies. As teams of veterinarians started extensive inspections in the region, representatives of cattle importer^s claimed that the spread of hoof-and-mouth disease was not through their livestock and that their animals were regularly inoculated.

The president of the Board of Directors of Izmir Cattle Feeders Association, Namik Toptan, reported that the hoof-and-mouth disease, which he claims was brought in through imported livestock, has spread to all feed lots. Toptan also claimed that livestock in imported without passing a veterinarians inspection and stated that because of the hoof-and-mouth disease hundreds of animals are being slaughtered early.

Cattle Farmers Loosing

Reporting that cattle farmers are loosing millions of liras, Toptan blamed the Pinar Entegre Meat Company and Besikcioglu Company and said:

"The hoof-and-mouth disease entered the nation through imported cattle. The cattle imported in ships by large companies do not pass a veterinarian's inspection, causing the spread of the disease. Many of the feed lots in the surrounding areas are slaughtering their livestock early and are experiencing losses. Hoof-and-mouth disease has spread to all feed lots. To combat the disease, importation should be immediately stopped and livestock already imported should be quarantined. Otherwise, this disease will be the end of the feed lot business in Izmir and its surrounding areas."

Pinar Meat and Besikcioglu

Ali Yilmaz, general manager of livestock for Pinar Entegre Meat, a member of the Yasar Group, said that the meat operation does not import livestock, that the importing is done by another branch of the group and that the possibility

of the hoof-and-mouth disease being transmitted through imported livestock does not exist. Reporting that livestock imported from other nations are kept under quarantine for 2 to 3 weeks and livestock imported from Europe are inoculated against hoof-and-mouth disease, he said:

"Cattle we import have already been inoculated against hoof-and-mouth disease where they were raised. However, Turkey has strains of hoof-and-mouth disease not found in Europe. Imported cattle that have not developed resistance to the local virus may catch hoof-and-mouth disease. Besides, hoof-and-mouth disease is not new to Turkey. If the cattle we import bring in anything they would bring in the European strain of hoof-and-mouth virus and I say that that strain cannot be found in any animal."

In addition, tax record holding exporter, Alpaslan Besikcioglu, held that among the cattle they imported, not one had hoof-and-mouth disease. He reported that 4,000 cattle were inoculated twice, each a week apart. Besikcioglu also said that, at the first sign of any disease, there would be immediate intervention and that it was nonsense to claim that hoof-and-mouth disease enters Turkey through imported livestock.

12816/6662

CSO: 5400/2470

CONTROLLING FUNGAL INFESTATIONS

Haifa INNOVATION in English No 137, Apr 37 p 6

[Text]

Behovot - A fungus which attacks fungi detrimental to certain crop plants has been identified by scientists at the Hebrew University's Faculty of Agriculture here. The research project, conducted by a team headed by Dr. Abraham Szejnberg, is now being continued towards its possible early commercialization.

Many agricultural crops suffer from fungus borne maladies, when climatic conditions are conducive to the growth of those organisms. An outstanding example is the powdery mildew disease, which attacks a large variety of vegetables, fruit trees and grain crops.

Efforts to combat those diseases have until now focused on a variety of chemical fungicides. Those sprays and dusts, however, have two serious disadvantages: they pollute the environment and they are expensive.

The fungus now identified for this purpose by Dr. Szejnberg, *Ampelomyces quisqualis*, already is present in many agricultural environments. It is a parasite that derives its nourishment by preying on the fungi that harm crops; in this manner it saps their vitality, restricts their growth and reduces their harmful effects. Experiments showed that a dense population of *Ampelomyces* caused cucumber plants, for instance, to produce significantly larger yields.

The project is sponsored by Biotechnology Applications Ltd., an Israel firm. It aims at the definition of practical methods for the controlled large scale production of *Ampelomyces* and their use for the protection of various crops.

/9274

C50: 5400/4522

GRASSHOPPER INVASION; BAUCHI STATE PEST CONTROL NEEDS

Kaduna NEW NIGERIAN in English 25 May 87 p 13

[Article by Waziri Garba]

[Text]

BAUCHI State Government would need about two million Naira to control the outbreak of grasshoppers which have been reported in nine local government areas of the state, the Commissioner for Information and Culture, Dr. Ibrahim Yakubu Lame, has said.

He said at a press conference in Bauchi on Friday that the federal government had already been informed of the outbreak which if not checked may cause serious damage to crops this season.

Dr. Ibrahim said about 10,000 litres of chemicals worth over one million Naira would be needed to spray the affected areas and destroy eggs laid by the grasshoppers before they were hatched around October/November when crops like millet were expected to be ready for harvesting.

The commissioner said a helicopter for spraying the chemicals would also be hired for one for 200 hours at a cost of

800,000 Naira.

He said all field staff of the Ministry of Agriculture and livestock control units had been mobilized to scout for any areas where the pests might be breeding for spraying, adding that farmers had also been alerted to take control measures before the situation got out of hand.

Dr. Ibrahim said at the moment, the pests feed on shrubs and anything green around as there were no more crops on the field that was why it was imperative to control their spread before cropping activities started this season.

"The control measures now are mainly aimed at destroying the eggs so that they do not breed at a time when crops are maturing", he said, and called on farmers in the state not to be deterred from planting by the reports of pest outbreak as everything was being done to ensure adequate protection for their crops.

The commissioner explained that total extermination of pests and quelea birds in the state couldn't be achieved by the state government alone because the problems of pests was a cross border one which required joint action not only by neighbouring states but with other countries bordering us.

The pests, he said, could infiltrate pest free areas from other pest infested areas while the quelea birds were migratory birds that could travel over long distances across the border, adding that the control of such a problem would therefore require a concerted national and international effort.

The outbreak of the grasshoppers first noticed in March in five local government areas of the northern zone of the state namely Katigum, Shira, Jams'ang, Misau and Gamawa is now said to have spread to Darazo, Toro, Duku and some parts of Tangale Waja Local Government.

/13046

CSO: 5400/203

BRIEFS

ARMY WORM INVASION--Parts of Bendel State have been invaded by army worms. A report from Benin said the worms have caused extensive damages to crops and forced many people to flee their homes [Text] [Kaduna NEW NIGERIAN in English 12 May 87 p 1] About 400 hectares of school-to-land farm have been destroyed by army worms in Rivers State the state governor, Col. Anthony Ukpo, said in Dodan Barracks yesterday. He said that total destruction was in the region of N2 million. He said that his government was short of pesticides and equipment to combat the menace of the worms and that an appeal had been sent to the Federal Government for financial assistance to help in eradicating the pest. On efforts made to improve water transportation in the state, Col. Ukpo said the government has ordered for ferries and vessels to ply the riverine areas. [Text] [Lagos DAILY TIMES in English 19 May 87 p 13] /13046

CSO: 5400/203

HA NAM NINH FIGHTS INSECTS, DISEASES

Hanoi NHAN DAN in Vietnamese 9 Apr 87 pp 1, 4

[Article by Van Xuyen: "Ha Nam Ninh Eliminates Insects and Diseases, Protects Rice and Subsidiary Food Crops"]

[Text] By the beginning of April 1987, 47 percent of the 145,635 hectares of fifth month-spring rice in Ha Nam Ninh had been infected with insects and diseases. Noteworthy was the fact that 67,379 hectares were infected with rice-damaging brown leafhoppers, of which 7,044 hectares were heavily infected and had a density of between 1,500 and 10,000 insects per square meter. Brown leafhoppers had developed on the new VN10 and VN20 rice varieties and even on local glutinous rice varieties. In the fields in the five districts in the southern part of the province insects and diseases appeared earlier than in other places and spread to more than 65 percent of the existing rice area. During that period the area infected by leaf rollers increased to 16,174 hectares, stem borers to 16,820 hectares and ground beetles to 11,876 hectares, and rice blast to 18,742 hectares. Black cut worms had appeared on 48 percent of the 18,742 hectares of peanuts in the province. Furthermore, corn ear worms and corn borers in low densities were also observed on winter-spring corn in Duy Tien and Kim Bang districts. The localities are encountering difficulties because of a shortage of electricity to fight drought and a shortage of pesticides. According to data the provincial people's committee, the rice area in the province affected by drought was 49,216 hectares, 26,172 hectares of which were both seriously affected by drought and infected by brown leafhoppers, but the electricity supplied met only 50 percent of the needs. In 1987 the plan called for providing the locality with 435 tons of pesticides of all kinds, but in fact during the past 3 months the province has received only 42 tons, including 8 tons of special pesticides. That is not to mention pesticides stored in the warehouses of a number of district agricultural materials corporations which are of poor quality, or which are not weighed and measured accurately when shipped from the warehouse. In some cooperatives the pesticides are not distributed fairly.

Faced with such difficulties, the provincial party committee and the provincial people's committee decided to set up guidance committees at all levels and immediately supplied each district with 100 tons of diesel oil to eliminate leafhoppers and fight drought. At the provincial, district, and city levels the committees were headed by the party chairmen. At the village and

cooperative levels the committees were headed by party committee chairmen and the cooperative directors. The province launched a movement for all the people to eliminate insects and diseases and to save the rice and subsidiary food crops, and regarded that as one of the central ad hoc missions of the locality. The Agricultural Service and the crop service corporations at all levels quickly organized training in techniques to eliminate insects and diseases for thousands of cadres and members of cooperative crop protection units. The province sent seven groups of cadres to the basic level to oversee the distribution and use of insecticides. It also sent hundreds of technical cadres to work with the crop protection units and teams in stepping up their inspections of fields, sought the most effective ways to eliminate insects and diseases, and guided and cooperative members in applying those methods.

In Xuan Thuy District 8,728 hectares of rice--66 percent of the planted area--were infected with rice-damaging insects and diseases, the highest rate in the province. The district decided to postpone the unnecessary meetings in order to concentrate its forces on saving the rice. Forty-one elementary general schools and four secondary general schools in the districts with more than 10,000 teachers and students closed down for from 3 to 5 days so that the teachers and students could go to the fields to kill leafhoppers and other insects. Every day tens of thousands of workers go to the fields to fight drought and eliminate insects and diseases in order to serve the rice. When they inspect the fields and observe the appearance of brown leafhoppers, many cooperative members in Xuan Phong, Xuan Bac, Xuan Phuong, etc. separated the rice plants and spread about a liter of kerosene per sao, then used bamboo sticks to gently shake the leafhoppers down onto the water where oil had been spread. On rice land infected by stem borers, leaf rollers, and rice blast the cooperative members use soot mixed with water to treat the leaves, or pick off the rice leaves infected with insects and diseases, pile them up, and burn them. In Nam Ninh District 5,350 hectares are infected by insects and diseases. In addition to deploying an integrated forecasting system from the production team level on up, the district decided to encourage people who uncovered infestations of brown leafhoppers by awarding them three work points and 50 dong. Implementing the slogan of eliminating insects and diseases by using pesticides in combination with manual methods, Hai Hau District mobilized 133,000 work days to catch 14 million ground beetles, 2.1 million leaf rollers, etc. Hundreds of hectares of peanuts in the districts of Y Yen, Nam Ninh, Tam Diep, and Hoang Long infested by leaf-eating black cut worms. The cooperatives there are applying manual measures to eliminate them, while also actively tending the peanuts so that they will develop rapidly.

With regard to the drought-affected area, the cooperatives in the province are both using pumping machines to draw water from the main canals and using bailing buckets to obtain water from the irrigation ditches. Once there is sufficient water the cooperative members combine eliminating insects and diseases with muck raking and the application of additional manure or potash to uniformly improve the quality of the rice.

5616

CSO: 5400/4364

ELIMINATION OF RICE-DAMAGING INSECTS, DISEASES URGED

Hanoi NHAN DAN in Vietnamese 8 Apr 87 pp 1, 4

[Article: "Concentrate on the Timely Elimination of Rice-Damaging Insects and Diseases"]

[Text] Since the end of March the weather has been suitable for many kinds of insects and diseases to arise and damage the 5th month-spring rice. Many types of insects and diseases have arisen and developed on a rather large area, such as rice blast, which is continuing to develop and spread to a more serious degree, and has infected a number of varieties, such as the Indian, glutinous, V14, and NN8 varieties. By 28 March the area affected by rice blast in a number of provinces amounted to more than 130,000 hectares, concentrated in the provinces of Nghe Tinh, Thanh Hoa, Ha Nam Ninh, Thai Binh, Hai Hung, Hanoi, and Ha Bac.

The 5th month-spring rice area infected by brown leafhoppers (including white-backed leafhoppers) also amounted to about 130,000 hectares, 44,000 of which were in Ha Nam Ninh, 25,000 of which were in Nghe Tinh, and 14,000 of which were in Thanh Hoa. The prevalent leafhopper infestation is a few dozen to hundreds of insects per square meter. The highest is a few thousand to tens of thousands of insects per square meter. In comparison to the same period in 1986, the leafhopper-infected area is larger, the degree of leafhopper infestation is 5 to 10 times greater, and the phenomenon of leafhopper infestation has occurred much earlier.

Stem borers are developing in many rice plantings in the lowland and midlands provinces, the degree of infestation is two or three times greater than in 1986 (in Hai Phong, Hanoi, Thai Binh,, and Ha Nam Ninh), and tens of thousands of hectares have been damaged.

The various kinds of ground beetles, especially rice bugs, have grown to epidemic proportions in Thanh Hoa and Nghe Tinh, and have appeared in Binh Tri Thien and in a number of districts in Quang Ninh, Hanoi, and Ha Son Binh. Green plant bugs are widespread in the lowland provinces, over rather large areas (Ha Nam Ninh, Thai Binh, Hai Phong, and Hanoi).

Rice wilt and small leaf curlers have also caused damage in some places.

Furthermore, according to the Crop Protection Department, between now and the end of the season it will be necessary to pay attention to coping with the following principal types of insects and diseases:

1. Rice blast of blossoms will arise and harm heading rice after the first of April, especially in the infected varieties.
2. Brown leafhoppers will increase rapidly with regard to area and density and will harm early rice and main-planting rice during heading, and may result in leafhopper infestation and cause much damage.
3. Two-spotted rice stem borers are causing wilt in the rice plantings, especially the main planting, which will head beginning in mid-April, and the late spring rice planting.
4. Ground beetles, especially rice bugs, will harm heading rice over a large area in Thanh Hoa and Nghe Tinh, and in a number of other provinces.

The Crop Protection Department of the Ministry of Agriculture and Food Industry recommends that the localities closely guide the insect and disease prevention and elimination campaign between now and the end of the season, and apply strictly and continuously the following measures:

1. Inspecting and closely monitoring the fields and categorizing the degree of damage in order to apply specific, more appropriate measures.
2. Under the conditions of a shortage of pesticides, it is necessary to prevent and eliminate insects by the use of all measures, such as:

Using nets to catch ground beetles, stem boring moths, mature leafhoppers, and the other kinds of insects before the rice heads.

Picking stem borer egg clusters from the rice is a highly effective manual method to eliminate stem borers.

Oil should be used to eliminate leafhoppers over a wide area in wet-rice paddies where the density is not yet too high.

All-out efforts should be made to retain water in paddies and restrict the spreading of nitrogenous fertilizer on paddies infected with rice blast.

3. The use of chemical pesticides: With regard to brown leafhoppers, it is necessary to investigate the ratio of hatched eggs before guiding the spraying of insecticides on infected varieties and on paddies heavily infected by rice blast.

Seven to 10 days after each cycle it is necessary to recapitulate experiences in order to promptly correct deficiencies.

Between now and the end of the season the work of preventing and eliminating insects and diseases will be very urgent and pressing. The localities must do a truly good job of concentrating their guidance on crop protection in order to reduce the damage caused by insects and diseases during this season.

VIETNAM

PLANT

BRIEFS

HARMFUL INSECTS REPORTED NATIONWIDE--The Vegetation Protection Department of the Ministry of Agriculture and Food Industry has said that rice bugs have appeared in late winter-spring ricefields in the northern provinces and are spreading to other ricefields and bushes in villages and hamlets. In the southern provinces, brown planthoppers have also appeared in various areas with a density of 200-400 in 1 square meter, especially on ricefields in the central provinces. It is anticipated that in the days ahead rice bugs will continue to spread to various irrigation canals, ponds, and bushes; while stem borer, brown planthopper, and paddy thrips will continue to develop and may cause damage in localities. As a result, the northern and southern provinces should spray sufficient insecticides to eradicate these harmful insects, especially in the cultivated and newly insect-stricken areas. [Text] [Hanoi Domestic Service in Vietnamese 10 Jun 87 [no time given] /8309

CSO: 5400/4380

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August 21, 1987

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